

*Updated Report*  
*June 2004*



*2003 Lucas County*  
*Adult Health Assessment*

*Commissioned by*  
**Healthy Lucas County**

# Foreword

## Updated+ June 2004

*The findings of the "2003 Lucas County Adult Health Assessment Released: January 2004" over-represented low-income residents of Lucas County compared to the percentage of low-income residents in the county's population. Thus, Healthy Lucas County commissioned Joseph A. Dake, PhD, MPH, to analyze the findings in proportion to the income distribution of Lucas County residents. Thus, the survey results presented in this report "Updated Report--June 2004: 2003 Lucas County Adult Health Assessment" are more representative of the Lucas County Population as a whole.*

A health assessment is valuable in that it can serve as one of the guides for strategic planning and can help in the judicious use of resources. It can influence the current course of action and support new areas of interest. Remember, however, this is only one planning tool; so when focusing on a particular finding, seek additional sources of information from service providers, target population, etc., to put the findings in perspective.

This document would not exist without the financial support of its sponsors. Healthy Lucas County would like to thank Kathy Silvestri, MPH, of the Healthy Communities Foundation of the Hospital Council of Northwest Ohio for guiding this health assessment process and the following funders: Healthy Communities Foundation of Lucas County Hospitals and Health Systems; Medical College of Ohio, Mercy Health Partners, ProMedica Health System,

St. Luke's Hospital; Lucas County Family Council; Toledo/Lucas County Health Department; Lucas County Commissioners; and the United Way of Greater Toledo.

While data are useful, it is really how people utilize the information that ultimately benefits our community. Healthy Lucas County is happy to assist you in your efforts to improve the health and well being of Lucas County residents. We encourage you to be open to new ideas and collaborations. We also encourage you to remain optimistic and positive about the excellent work our community can do together.

Best Regards,

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# Healthy Lucas County

The vision of Healthy Lucas County is to create a healthy Lucas County community by mobilizing partnerships and taking strategic action. The mission of Healthy Lucas County is to foster collaborative and continuous community health assessment.

## History of Healthy Lucas County

A broad-based coalition of representatives from health promoting organizations in Lucas County began meeting in 1997 and determined the need to assess the health status of Lucas County residents. After much work and effort, in December of 1999, adult and youth surveys were conducted to provide health risk behavior information on Lucas County residents. The findings were released in 2000 and have been used to promote collaboration between organizations and as a foundation for health planning. They have attracted millions of dollars for health improvement projects in Lucas County.

Since that time, under the name of Healthy Lucas County, the coalition became a committee of the Lucas County Family Council and is comprised of a steering committee and focus area facilitators who convene community members for health planning and action in the Healthy People 2010 areas of:

- Access to Quality Health Care
- Alcohol and Other Drugs
- Health Disparities
- Maternal, Infant & Child Health
- Mental Health
- Physical Activity and Nutrition
- Preventive Medicine & Health Screenings
- Safety, Injury & Violence Prevention
- Sexual Health & Teen Pregnancy Prevention
- Tobacco Use Prevention

The Healthy Communities Foundation of the Hospital Council of Northwest Ohio, with funding from the Lucas County Family Council, manages the community health assessment functions of Healthy Lucas County.

## Lucas County Family Council

The mission of the Lucas County Family Council (LCFC), a department of the Lucas County Board of Commissioners, is to support strong, nurturing and healthy families by creating and sustaining a collaborative, accessible and effective system of services. LCFC membership includes representation of all the publicly funded youth and family serving systems throughout Lucas County as well as broad representation of community service providers, family advocates, community leaders and parent representatives.



# Lucas County

## Adult Health Assessment

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# Lucas County Adult Health Assessment

## Executive Summary

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This executive summary provides an overview of health-related primary and secondary data for Lucas County adults (defined as 19 years of age and older). The findings are based on data collected by Great Lakes Marketing during a comprehensive community health assessment study completed during the summer of 2003 and the data analysis of Joseph A. Dake, PhD, MPH commissioned by Healthy Lucas County in April and completed in June of 2004. The findings of the "2003 Lucas County Adult Health Assessment Released: January 2004" over-represented low-income residents of Lucas County compared to the percentage of low-income residents in the county's population. Thus, the survey results presented in this report "Updated Report--June 2004: 2003 Lucas County Adult Health Assessment" have been weighted to better represent the Lucas County population as a whole.

This research was conducted in conjunction with Healthy Lucas County, a community collaborative, and the Healthy Communities Foundation of the Hospital Council of Northwest Ohio. Data from a comparable study conducted in 1999 has been included for general reference purposes. Due to differences in methodologies, direct comparison of the 1999 and 2003 adult survey results is not suggested. Relevant secondary data are provided to add additional insights into the findings.

### Primary Data Collection Methodology

A total of 2,031 Lucas County adults completed a customized version of the CDC BRFSS (Centers for Disease Control Behavior Risk Factor Surveillance System) survey. The margin of error for the 2003 study is approximately plus or minus three (3) percentage points for the total sample. *Please note that due to a small sample size, the margin of error for the subgroup of Hispanic adults is plus or minus 15%.*

#### Adult Sample Sizes

- 2003 sample: 2031 adults
- 1999 sample: 2137 adults

The BRFSS is conducted nationally with data available at the state level for comparison purposes. Some BRFSS questions were not used in this study to allow for the addition of questions focused on issues of particular relevance in Lucas County. In most cases, the exact wording from the BRFSS questionnaire was retained so that the responses from Lucas County residents could be trended with results from previous state and national research efforts. Due to differences in survey methodologies, exact comparisons are not encouraged.

In 2003, data were collected using Geo-Area Intercept Interviewing. This process maximizes the reach in the community to assure all segments of the population are sampled, creating a database that is representative of the geographic and demographic



## Primary Data Collection Methodology

characteristics of the county. Surveys were self-administered at a variety of locations throughout Lucas County, including supermarkets, libraries, and social or recreational clubs (Appendix iv). The mix of data collection sites was selected to reflect the population demographics of Lucas County. During the 1999 health assessment, the Great Lakes Marketing consumer panel was randomly sampled and field sampling was limited to certain population segments. Both data sets were weighted to reflect population percentages for gender, age, and ethnicity using the latest census data. However, sampling methodologies should always be considered when analyzing survey data.

The data collection procedures were designed to protect the respondents' privacy and encourage complete and honest responses. In most cases, respondents completed the survey independently. Readers were available as needed.

After the data were compiled, a preliminary analysis was conducted to verify that the answer choices on each survey were logical. If two given answers did not pass the logic check, they were recorded as "no answer." For example, if a respondent reported having never used marijuana, but then reported having used marijuana once or twice in the past 30 days, both questions were recorded as "no answer." Surveys with more than three illogical choices were eliminated from the final sample and were not included in the data analysis. Approximately 30 of the surveys were eliminated from the final analysis because they did not pass the logic test or were less than 80% complete.

To be representative of the county, data collection was balanced by zip code and the resulting database was weighted by age, gender, and race using 2000 census data. African American adults were over-sampled then weighted in proportion to achieve a greater understanding of their health status. An unintentional consequence of over-sampling is that a disproportionate number of African Americans were surveyed in the lower income levels. Thus, rates for certain health behaviors, such as smoking, may be overestimated for this population. Percentages are based on the number of valid responses for the question unless otherwise noted.

When appropriate, state and national results from the 1999, 2000, 2001, and 2002 surveys conducted by the CDC are presented<sup>1</sup>. Note that the CDC adult survey uses a telephone data collection methodology as opposed to the personal interviewing method used in Lucas County. These data collection methods have afforded a measure of general health trends in past studies. However, it is important to evaluate research methods when analyzing differences in these data sets.

The 2003 database was weighted based on gender, age, ethnicity, and income level using 2002 Census estimates for Lucas County from their American Community Survey Data.<sup>A</sup>

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<sup>1</sup> Centers for Disease Control. For more information, see <http://www.cdc.gov/brfss>.

<sup>A</sup> United States Census Bureau. American Community Survey. For more information, see <http://www.census.gov/acs>

## Primary Data Collection Methodology

This represents the most accurate assessment of Lucas County demographics currently available. Multiple weightings were created based on this information to account for different types of analyses. For more information on how the weightings were created and applied, see Appendix iii.

## Data Use Limitations

- The January 2004 findings over-represented low-income residents of Lucas County.
- The data reported in the June 2004 Update have been weighted by age, gender, age, race/ethnicity, and income level to reflect Lucas County demographics.
- The Hispanic population was under-sampled. Results should be used with caution.
- African American adults were purposely over-sampled so that a separate analysis could be conducted for this group. Unfortunately, a disproportionate number of those in the lower incomes were surveyed, leaving too few in the other categories for appropriate weighting as a separate subsample. As a result, some rates of health behaviors may be overestimated for this population.
- Due to differences in sampling methodologies, direct comparisons of these findings with other studies are not recommended.

## Data Summary

**Health Perceptions.** Using a five-point scale (one is excellent and five is poor), on average, Lucas County adults surveyed rate their health a 2.4 (where three is good and two is very good). The 2003 health assessment reports that 15% of adult respondents rate their health as fair or poor. The following groups of respondents were most likely to rate their health status with scores of fair (4) or poor (5):

- 39% of adults who have been diagnosed with angina/coronary heart disease
- 36% of adults who have been diagnosed with diabetes
- 35% of adults with household incomes under \$10,000
- 28% of adults with household incomes under \$25,000
- 27% of adults who have been diagnosed with arthritis
- 25% of adults who have been diagnosed with asthma
- 25% of African Americans
- 23% of adults who have been diagnosed with high blood pressure
- 21% of adults who have been diagnosed with high blood cholesterol
- 19% of adults ages 55 and older

### General Health Scale

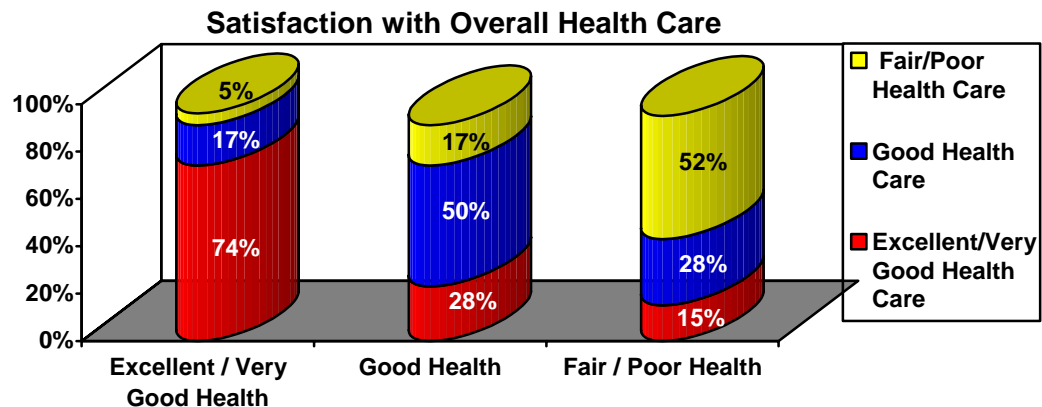
- 1 Excellent
- 2 Very Good
- 3 Good
- 4 Fair
- 5 Poor

## Data Summary

**Health Care Satisfaction and Access.** According to this survey, more than three-quarters of Lucas County adults feel the quality of their health care is excellent, very good or good (80%), yet 16% rate the satisfaction with their health care as fair or poor, up from the figure of 12% reported in 1999.

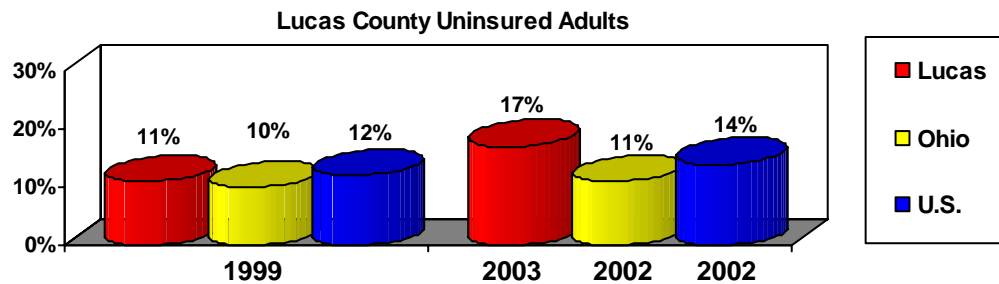
Overall, low-income families are least satisfied with their health care. Over one-third (34%) of adults surveyed from the lowest-income families (\$10,000 or less annual income) rate their satisfaction as fair or poor, compared to 25% for families with annual incomes of \$10,000-\$15,000 and 14% for those with incomes in the \$15,000-\$25,000 range. On the other end of the spectrum, 8% of families with annual incomes of \$50,000-\$75,000 and 11% with incomes of greater than \$75,000 rate their satisfaction as low or poor. Satisfaction with overall health care was not correlated with age or gender.

In 2003, those surveyed who perceive themselves to have fair to poor health are least satisfied with the quality of their overall health care. Over half (52%) of those who rate their personal health as fair or poor also rate their satisfaction with their overall health care as fair or poor. The following graph further illustrates this trend. It shows that those with excellent or very good health are most likely to rate their health care as excellent or very good (74%).



**Health Care Coverage.** In 2003, more than three-quarters (82%) of Lucas County adults who were surveyed report having some form of health care coverage with 17% saying they lack any kind of health coverage, up from 11% in 1999. The chart below displays the Lucas County uninsured figure with the most recent BRFSS data for the state and nation, collected in 2002 (note BRFSS data are ages 18 – 64 only).

## Data Summary



Results of the health assessment indicate that in Lucas County, the following groups are least likely to have health coverage:

- 40% of those who have an annual household income under \$10,000
- 33% of those who have an annual household income under \$25,000
- 30% of Hispanic adults
- 28% of African American adults
- 26% of unmarried adults
- 23% of adults less than 35 years of age<sup>2</sup>
- 23% of adult males

In the past twelve months, a total of 25% of Lucas County adults surveyed were without health care coverage at some point in time. This percentage increases among Hispanics (40%), those with household incomes under \$10,000 (56%), single parents (40%), African Americans (44%), and 19 to 34-year-olds (36%). The primary reasons for coverage lapses were job changes and financial constraints.

**Cardiovascular Disease.** Major cardiovascular diseases (heart disease and stroke) were the first and third causes of death from 1993-2001 (see box). According to this Lucas County health assessment, approximately 9% of adults report having been diagnosed with angina or coronary heart disease. Within the adult population of those 60 and over, 19% were diagnosed in 2003, the same as reported for this group in 1999.

### Leading Causes of Death Lucas County 1993 - 2001

• Heart Disease	14,447 deaths	1,600 avg. per year
• Cancers	9,400 deaths	1,000 avg. per year
• Stroke	2,745 deaths	300 avg. per year
• Lung Diseases*	2,206 deaths	245 avg. per year
• Diabetes	1,196 deaths	133 avg. per year

*\*Chronic Lower Respiratory Diseases  
(Source: ODH Information Warehouse)*

<sup>2</sup>The 2003 Lucas County health assessment reports that 23% of those ages 19 – 34 are currently uninsured. Only 12% of adults older than 34 years are currently uninsured.

## Data Summary

Just over one in four (26%) of Lucas County adult respondents have been diagnosed with high blood pressure and 25% have been diagnosed with high blood cholesterol. These health issues were reported most by members of the senior population.

**Immunizations.** Just under one-third (31%) of surveyed Lucas County adults report having had a flu shot during the past 12 months. Similar figures were researched for the state and nation finding a rate of 32% for the U.S. and 29% for Ohio (2002 BRFSS.) The Lucas County rate has decreased from the 36% reported in the 1999 health assessment. One out of five (22%) Lucas County adults surveyed have had a pneumonia vaccination at some time in their life, which is consistent with U.S. (21%) and Ohio (21%) figures from the 2002 BRFSS and the 22% reported in Lucas County in 1999. Seniors age 60 and older are most likely to have had their vaccinations, with 64% up-to-date on their flu shots and 51% having had their pneumonia vaccination. Lucas County's senior immunization rates are also consistent with state and national rates, according to 2002 BRFSS data.

**Prevalence Issues.** The following chart shows the prevalence for selected health problems among Lucas County adult respondents. High blood pressure, depression, high blood cholesterol, and arthritis are four of the most common health problems reported by Lucas County adults. The prevalence of adults with high blood cholesterol, asthma, or coronary heart disease is slightly higher than the estimate from 1999. The prevalence of adults with high blood pressure and arthritis are slightly lower compared to 1999 while the prevalence with diabetes has not changed. The following chart shows the percentage of adults diagnosed and emphasizes the groups most likely to have been diagnosed with each health problem listed.

## Data Summary

**Please note:** Direct comparisons of the data sets from the various sources and years listed in the table below are not advised due to variances in methodologies.

Lucas County Adults Diagnosed With Selected Health Problems*					
Health Problems	Highest % of Lucas diagnoses (2003)	Lucas (2003)	Lucas (1999)	Ohio (2001)	U.S. (2001)
High blood pressure	Age 60 & up (53%) African Americans (33%) Income <25K (34%)	26%	29%	27%	26%
Depression	Age 35-44 (32%) Income <25K (33%) Females (27%)	24%	N/A	N/A	N/A
Arthritis	Age 60 & up (51%) Females (30%)	26%	27%	N/A	N/A
High blood cholesterol	Age 60 & up (48%)	25%	22%	33%	30%
Anxiety	Age 45-54 (21%) Income <25K (24%) Females (22%)	18%	N/A	N/A	N/A
Asthma	Age 19-24 (19%) Income <25K (19%)	13%	12%	10%	11%
Coronary heart disease or angina	Age 60 & up (18%) Income <25K (17%) Males (11%)	9%	7%	N/A	N/A
Diabetes	Age 60 & up (18%)	9%	9%	7%	7%

*\*Question asked: Has a doctor ever told you that you had [health problem]? No further definitions were provided.*

**Cancer.** Vital statistics from the Ohio Department of Health, Information Warehouse, report that cancer is the second cause of death (9,400 deaths) in Lucas County from 1993-2001. Averaging just over 1,000 deaths per year for this time period, the majority of cancer deaths (30.9%) are respiratory (lung, bronchus, trachea, and larynx) followed by cancers of the digestive system (16.9%), breast (7.9%), and prostate (5.4%). Currently in Lucas County, only about 0.3% of the surveyed adults say that cancer is a major impairment or health problem that limits their activities.

**Health Screenings.** The American Heart Association (AHA) recommends that adults 20 or over should have a fasting lipoprotein profile (total cholesterol, LDL cholesterol, HDL cholesterol, and triglycerides) a minimum of once every 5 years. AHA also encourages adults to have their blood pressure checked on a regular basis to make sure it is within normal limits. Overall, 87% of all Lucas County adults surveyed, including 96% of those

## Data Summary

ages 60 plus, report having had their blood pressure checked during the past year. Greater than two-thirds (71%) of Lucas County adults surveyed, including 91% of those ages 60 plus, have had their blood cholesterol checked in the past 5 years.

Respondents who are currently without health care coverage are least likely to have had cardiovascular screenings. Seventy-five percent of those currently uninsured have had their blood pressure taken in the past year compared to 92% of the insured adults.

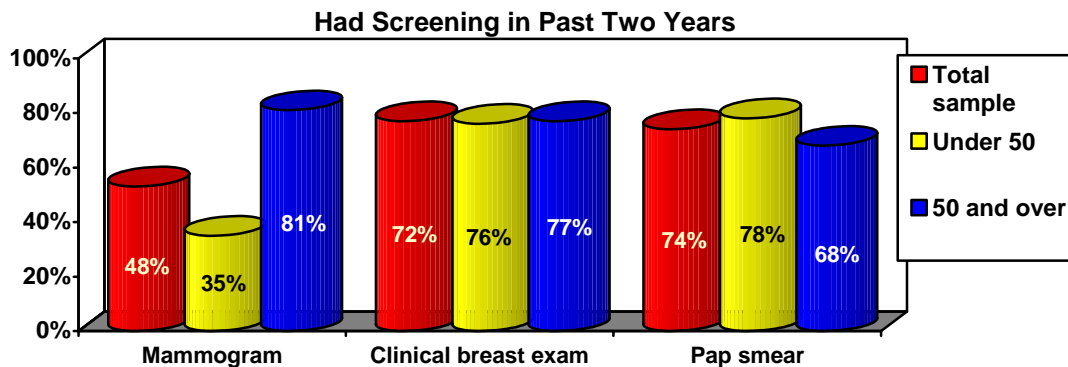
Similarly, 54% of uninsured adults report having had their blood cholesterol checked in the past 5 years compared to 78% of insured adults.

The American Cancer Society recommends that men and women begin colorectal screenings at 50 years of age. In Lucas County, 38% of adults surveyed aged 55–59 have never been screened and 40% have been screened in the past two years. Among those ages 60 plus, 31% have never been screened for colorectal cancer and 41% have had a screening test in the past two years.

### Lucas County Adult Cardiovascular Screenings

- 87% have had their blood pressure checked in the past year
- 71% have had their total blood cholesterol checked in the past 5 years

**Women's Health.** Adult women surveyed were asked when they last had a mammogram, clinical breast exam, or Pap smear. Women aged 50 and over are most likely to have had a mammogram within the past two years. Age is less of a factor in clinical breast exams and Pap smears. The following graph shows the prevalence of women's health exams for the total sample and by age:



**Tobacco Use.** According to *The AHCPR Clinical Practice Guideline: Smoking Cessation*, 1996, the definition of a current smoker is one who has smoked 100 cigarettes or more in a lifetime and currently smokes on all or some days. In the 2003 Lucas County study, 49% of the adults report smoking at least 100 cigarettes in their lifetime. The percentage of adults who used to smoke but have quit is 20% and the prevalence of current smokers (smoking daily or some days) is 29%. Twenty-two percent of these

## Data Summary

adults smoke daily and 7% smoke on some days. These percentages have increased slightly from the 1999 figures of 21% smoking daily and 6% smoking some days.

In the 2003 Lucas County study, of those in the higher income category (over \$25,000 annual household income) 15% smoke daily, 7% smoke some days, and 23% were former smokers. This is consistent with 1999 findings of those with annual household incomes over \$25,000, that show 16% smoke daily, 4% smoked some days and 28% were former smokers.

The survey data identified that in the lower income category (under \$25,000 annual household income), the same percentage have smoked over 100 cigarettes in their lifetime (62% of respondents) as reported in 1999; however, 39% smoke everyday (30% in 1999), Fewer have quit smoking this year 16% (2003) and 29% (1999).

National Health Interview surveys from 1995-2000 show that the overall number of current smokers in the U.S. has declined slightly and the number of former smokers declined from 1995-1998 but then increased just under 1% from 1999-2000.

In 2003, survey respondents who smoke daily are more likely to be from the following groups:

- 40% of those adults with an annual income of less than \$25,000
- 34% of adult males

Nearly three out of four (74%) current adult smokers surveyed (daily and some days) have, at one point in time, tried to quit cigarette smoking. About 34% of Lucas County adults say somebody, themselves or another person has smoked cigarettes, cigars or pipes in the past 30 days in their home.

Overall, smokers are less likely to have health care coverage and they are also more likely to engage in other health risk behaviors such as consuming marijuana and alcohol, and having multiple sexual partners. Furthermore, they are more likely to have been diagnosed with non-age specific health problems such as asthma, depression, or anxiety.



## Data Summary

The following chart provides a profile of smokers versus non-smokers in Lucas County:

Health Issue	Lucas Smokers	Lucas Non-Smokers
Has health coverage	68%	87%
Drank alcohol in the past 30 days	54%	50%
Has been diagnosed with depression	35%	19%
Rated health status as fair or poor	22%	12%
Has been diagnosed with anxiety	24%	16%
Has been diagnosed with asthma	17%	12%
Had multiple sexual partners in the past year	16%	9%

**Alcohol Consumption.** According to this health assessment, 51% of Lucas County adults have had at least one alcoholic beverage during the past 30 days. In 1999, a rate of 54% was reported. Since 1999, decreases have been noted for female drinkers (50% down to 48%) and male drinkers (58% to 54%).

In 2003, 33% of Lucas County adults who drink alcohol (17% of all surveyed adults) report they have been binge drinking (defined by BRFSS as having five or more drinks on one occasion) at least once in the past month. About 14% binged an average of once or twice in the past month, and 18% binged three or more times. Among the survey respondents, binge drinking is most common among male drinkers (42% compared to 23% of females) and 19 to 29-year old drinkers (56% compared to 29% of those 30 and older).

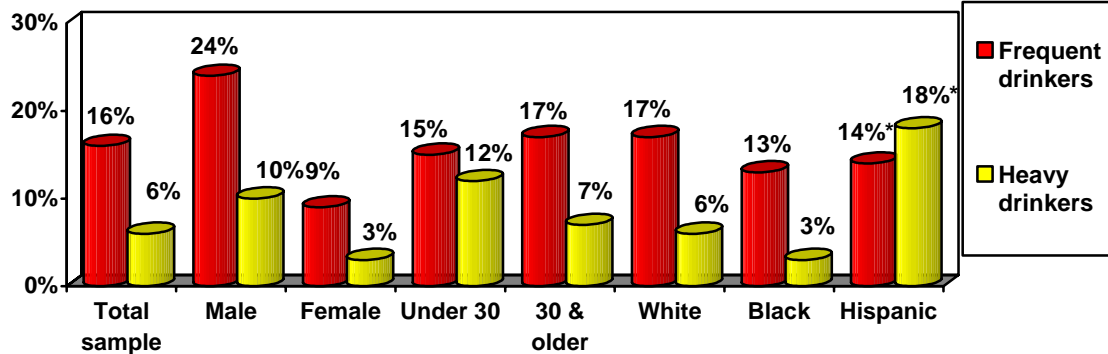
About 35% of all Lucas County adults report drinking alcohol one or two days a week and 16% drink an average of three or more days per week. The 1999 health assessment reported a similar number of adults drinking an average of three or more days per week; thus, the decrease in drinking over the past few years was a shift from light drinking to no drinking.

When considering all Lucas County adults surveyed who consume alcohol, 59% had an average of one or two drinks per occasion, 24% had three to five drinks, and 13% had an average of more than five drinks per occasion. These percentages are similar to those reported in 1999.

The following graph shows the percentage of frequent drinkers (who drink an average of three or more times a week) and heavy drinkers (who drink six or more drinks per occasion) for all Lucas County adults surveyed. It shows that heavy drinking behaviors are more common among males.

## Data Summary

**Frequent and Heavy Drinking among Adults**



*Frequent drinker = drinks an average of three or more times per week*

*Heavy drinker = consumes six or more drinks per occasion*

*\*Due to the few number of Hispanic adults sampled (n=57), these data may not be reliable for this population*

**Drug Use.** In 2003, 16% of Lucas County adults surveyed report having consumed an illegal drug and 8% have taken a legal drug differently than prescribed in the past four months. In addition, 9% of all adults have used marijuana, increasing to 18% of 19 to 29-year-olds and 13% of males. Fifteen percent of Lucas County adult drug users report having regularly failed to fulfill obligations at work or home, placed themselves in dangerous situations, or had legal problems due to their use of drugs.

**Sexual Behavior.** Just under two-thirds (65%) of Lucas County adults have been sexually active in the past year (defined as having sexual intercourse in the past 12 months). Most (54%) of those currently sexually active have had one partner during the past twelve months, while just over one in ten (11%) have had multiple partners. Those groups most likely to report having had multiple partners in the past year including 21% of adults ages 19 to 29 and 19% of African Americans.

Three out of five (60%) Lucas County sexually active adults use some form of birth control. Of the adults who have had multiple partners in the past year, 46% report not using a condom during their last sexual encounter compared to 79% of those with one partner. Of those sexually active adults who reported not using birth control, 46% say that they don't think they or their partner can become pregnant.

### Number of Sexual Partners In Past Year

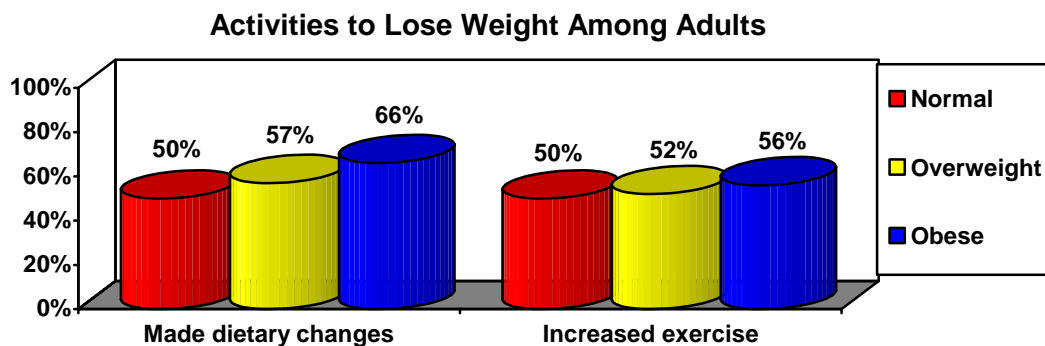
- None (28%)
- One (54%)
- More than one (11%)
- Don't know (4%)

In the past year, approximately 4% of Lucas County adults have engaged in sexual activity that puts them at an increased risk of contracting HIV (used intravenous drugs, were treated for a sexually transmitted disease, gave or took money for sex, or had anal

## Data Summary

sex without a condom). This number increases to 19% among those with multiple partners. One in five (19%) Lucas County adult respondents at one point in time engaged in sexual activity after consuming alcohol or taking drugs that they would not have engaged in if sober. A little less than one in ten (9%) have been forced to have sexual intercourse in their lifetime.

**Weight Control.** Using the Body Mass Index calculation and self-reported height and weight information, just under one-third (32%) of Lucas County adults are classified as normal weight, 33% are considered overweight, and 27% are considered obese. About 47% of all adults are currently trying to lose weight while 47% of overweight adults said they are trying to lose weight, increasing to 77% among obese adults. The following graph shows weight loss activity for adults of normal weight compared to those who are overweight or obese, based on the results of this survey. It shows that obese adults are more likely than normal-weight adults to make dietary and physical activity changes to lose weight.



Based on this survey, 60% of Lucas County adults report eating fruit and 83% ate green salad three times or less in the past week. Many agencies recommend that adults eat five or more servings of fruits and vegetables per day.

**Mental Health and Suicide.** The 2003 assessment reports that 6% of all Lucas County adults seriously considered attempting suicide in the past 12 months and 14% of adults report feeling so sad or helpless almost every day for two weeks or more in a row during the past 12 months that they stopped doing some usual activities. These feelings of sadness are more common among the following groups of respondents:

- 24% of adults who rate their health as fair or poor
- 21% of adult Hispanics
- 21% of those ages 19 to 29 years
- 20% of adult single parents

**Quality of Life.** In 2003, 40% of Lucas County adults surveyed report having at least one major impairment or health problem that limits their daily activities. Those more

## Data Summary

likely to be limited in their activities because of at least one health problem are adults aged 50 and over (56%) and even more so for those aged 70 and over (70%).

One-seventh (15%) of adults with an impairment that limits their activities, or 6% of all Lucas County adults surveyed, report needing assistance with routine care needs such as daily/weekly chores, shopping, or business transactions because of their impairment or health problem.

**Social Context.** The results of this survey indicate that just over one in five (22%) Lucas County adults keep firearms in their home and 6% keep a loaded and unlocked firearm. Those most likely to keep firearms in their homes are males (27%) and adults ages 50 and older (27%). Please note that 21% of those adults who have children living in their homes have a firearm and 5% have one that is loaded and unlocked. These statistics are similar to those reported in 1999.

In the past 30 days, 16% of all Lucas County adults surveyed, including 34% of African Americans, and 30% of Hispanic adults, have been concerned about getting enough food for their family. Also, 5% of all adults either did not look for or receive help getting food in the past month.

**Children's Health.** The survey indicated that during the past 12 months, one in seven (15%) parents report that at least one of their children have been without health care coverage at some time and nearly one in twelve (8%) say that one of their children is currently without coverage. Also, 26% of African American parents report that at least one of their children has been uninsured in the past year compared to 13% of White and 18% of Hispanic adults with children in the home. Lower income parents (less than \$25,000 annual household income) are more likely to have children that have been uninsured relative to those with an annual household income greater than \$25,000 (28% compared to 10%).

Three out of five (62%) women with children under five breastfed their youngest child. Furthermore, 76% of higher income families (over \$25,000 annual household income) breastfed compared to 52% of lower income families (less than \$25,000 annual household income).

In 2003, 82% of parents with children ages four and under report using car safety seats for their children all of the time and 7% say they use them nearly all of the time. Parents of children ages 5 – 11 report that 42% wear a bike helmet always or most of the time when they ride a bicycle.

### Most Common Health Problems Reported By Adults With Activity Limits

- Arthritis (34%)
- Back or neck problem (23%)
- Breathing problem (7%)
- Walking problem (6%)

## Data Summary

This 2003 survey found that 19% of Lucas County parents of African American youth (12 – 18 years of age) and 18% of Hispanic parents report youth are home alone after school for more than four hours on an average day compared to 5% of White youth. When considering all surveyed households, nearly one-half (46%) of the parents surveyed reported that their adolescent or teenagers are unsupervised for at least an hour after school.

Three out of four adults surveyed (76%) have discussed sex with their children ages 12 – 18. Slightly more adults (87%) have discussed the use of alcohol, tobacco or other drugs with their adolescents and teenagers.

**Minority Data.** Note that African American adults were over-sampled<sup>3</sup> to gain a better understanding of their health status. Due to a disproportionate number of African Americans surveyed in the lower-income levels, rates for certain health behaviors, such as smoking, may be overestimated. For additional information, review the full community assessment report. *Please note that due to the small number of adults surveyed, the Hispanic figures should be used with caution.*

**Health Assessment Summaries** The following table lists data from the 1999 and 2003 Lucas County health assessments. The first three issues are related in that those surveyed who rate their health as fair or poor are more likely to rate their satisfaction with health care as fair or poor. Those who are not currently insured are more likely to rate their satisfaction with health care lower than those who currently have coverage.

**Please note:** Direct comparisons of the data sets listed in the table below are not advised due to variances in methodologies.

Lucas County Profile		
Adult Health and Risk Issues (percent of all adults)	1999	2003
Rated health as fair or poor	14%	15%
Rated satisfaction with health care as fair or poor	12%	16%
Currently does <u>not</u> have health care coverage	11%	17%
Had a blood pressure screening in the past year	85%	87%
Had a blood cholesterol screening in the past 5 years	70%	71%

<sup>3</sup> Over-sampling allows for more data to be collected from this subgroup; however, the data have been weighted to reflect their actual proportion of Lucas County adults.

## Data Summary

**Please note: Direct comparisons of the data sets listed in the table below are not advised due to variances in methodologies.**

<b>Lucas County Profile</b>		
<b>Adult Health and Risk Issues</b>		
<b>(percent of all adults)</b>	<b>1999</b>	<b>2003</b>
Visited dentist or dental clinic in past year	65%	66%
Has had a flu shot in past year	36%	31%
Diagnosed with high blood pressure	29%	26%
Diagnosed with high blood cholesterol	22%	25%
Diagnosed with angina	7%	9%
Diagnosed with arthritis	27%	26%
Diagnosed with diabetes	9%	9%
Diagnosed with asthma	12%	13%
Binge drinking on one or more occasions in the past month <sup>4</sup>	13%	17%
Currently smoke cigarettes <sup>5</sup>	27%	29%
Keeps a loaded and unlocked firearm in the household	4%	6%
Classified as overweight or obese according to BMI	65%	60%

<sup>4</sup> Defined as having five or more drinks on an occasion. Percent based on all adults.

<sup>5</sup> Percent of adults who have smoked over 100 cigarettes in their lifetime and currently smoke cigarettes daily or on some days.

## Data Summary

**Other Data Sources** The following table lists Lucas County adult health variable survey results and state and national data reported by the CDC. The data for Ohio and the nation were collected by CDC using the 2002 BRFSS (unless year otherwise noted).

**Please note: Direct comparisons of the data sets listed in the table below are not advised due to variances in methodologies.**

Adult Variables	Lucas County 2003	Ohio	National <sup>6</sup>
<b>Alcohol Consumption</b>			
Binge drinking on one or more occasion in the past month (percent based on all adults who drink)	33%	28.4%	28.9%
Driving after having too much to drink in past month <sup>7</sup>	4%	3% (1999)	5% (1999)
<b>Asthma and Diabetes</b>			
Has been diagnosed with asthma	13%	10.3%	11.8%
Has been diagnosed with diabetes	9%	7.7%	6.7%
<b>Hypertension and Cholesterol Awareness</b>			
Had blood pressure checked in past one to two years	93%	96% (1999)	95% (1999)
Has been diagnosed with high blood pressure	28%	26.6% (2001)	25.6% (2001)
Ever had blood cholesterol checked	74%	76% (2001)	77% (2001)
Has been diagnosed with high blood cholesterol	25%	32.8% (2001)	30.2% (2001)
<b>Health Care Access</b>			
No health insurance	17% (ages 18+)	11.4% (ages 18-64)	14.1% (ages 18-64)
<b>Health Status</b>			
Rated general health as fair or poor	15%	13.7%	14.3%
<b>Immunization</b>			
Had flu shot in past 12 months/age 65+	68%	66.6%	68.4%
Have ever had pneumonia vaccination/age 65+	58%	63.6%	62.9%
<b>Women's Health</b>			
Have had a mammogram/age 18 and over	63%	66.4%	63.4%
Have had a mammogram/age 50 - 59	95%	93.4%	95%
Have ever had clinical breast exam/age 18 and over	89%	90.1%	91%

<sup>6</sup> BRFSS provides a median based on responses from participating states.

<sup>7</sup> The Lucas County questionnaire said, "During the past month, how many times have you driven when you've perhaps had too much to drink?" Comparative data do not include the word "perhaps."

## Demographics

### Lucas County Population By Age Groups and Gender U.S. Census 2000

Category	Total	Males	Females
<b>Lucas County</b>	<b>455,054</b>	<b>218,764</b>	<b>236,290</b>
<b>0-4 years</b>	<b>31,180</b>	<b>15,942</b>	<b>15,238</b>
1-4 years	24,948	12,711	12,237
< 1 year	6,232	3,231	3,001
1-2 years	12,461	6,390	6,071
3-4 years	12,487	6,321	6,166
<b>5-9 years</b>	<b>34,317</b>	<b>17,535</b>	<b>16,782</b>
5-6 years	13,319	6,801	6,518
7-9 years	20,998	10,734	10,264
<b>10-14 years</b>	<b>34,302</b>	<b>17,649</b>	<b>16,653</b>
10-12 years	21,062	10,855	10,207
13-14 years	13,240	6,794	6,446
<b>12-18 years</b>	<b>46,114</b>	<b>23,382</b>	<b>22,732</b>
<b>15-19 years</b>	<b>32,771</b>	<b>16,502</b>	<b>16,269</b>
13-15 years	19,874	10,053	9,821
15-17 years	19,682	9,968	9,714
16-18 years	19,433	9,893	9,540
18-19 years	13,089	6,534	6,555
19-20 years	13,350	6,611	6,739
20-24 years	31,695	15,419	16,276
25-29 years	32,379	15,859	16,520
30-34 years	30,678	15,090	15,588
35-39 years	33,851	16,409	17,442
40-44 years	35,603	17,346	18,257
45-49 years	32,863	16,073	16,790
50-54 years	28,543	13,941	14,602
55-59 years	20,692	9,833	10,859
60-64 years	16,739	7,871	8,868
65-69 years	14,812	6,580	8,232
70-74 years	15,569	6,718	8,851
75-79 years	12,985	5,095	7,890
80-84 years	8,768	3,001	5,767
85-89 years	4,770	1,342	3,428
90-94 years	1,969	440	1,529
95-99 years	505	104	401
100-104 years	53	11	42
105-109 years	7	3	4
110 years & over	3	1	2
<b>Total 85 years and over</b>	<b>7,307</b>	<b>1,901</b>	<b>5,406</b>
<b>Total 65 years and over</b>	<b>59,441</b>	<b>23,295</b>	<b>36,146</b>
<b>Total 19 years and over</b>	<b>329,193</b>	<b>154,486</b>	<b>174,702</b>



# Lucas County Profile

## *General Demographic Characteristics* (Source: U.S. Census Bureau, Census 2000)

### ***Total Population***

2002 Total Population Estimate (July 1)	453,506
2001 Total Population Estimate (July 1)	453,348
2000 Total Population	455,054
1999 Total Population (Estimate July 1)	446,482
1990 Total Population	462,361

### Largest City-Toledo City

2000 Total Population	313,619
1990 Total Population	332,943

### ***Population By Race/Ethnicity***

Total Population	455,054 (100%)
White Alone	352,261 (77.5%)
African American	76,721 (16.9%)
Hispanic or Latino (of any race)	20,658 (4.5%)
Two or More Races	11,207 (2.5%)
Other	8,167 (1.8%)
Asian	5,326 (1.2%)
Native American	1,296 (0.3%)

### ***Population By Age***

Under 6 years	37,712 (8.3%)
6 to 17 years	81,579 (17.9%)
18 to 24 years	44,741 (9.8%)
25 to 44 years	133,402 (29.3%)
45 to 64 years	97,886 (21.5%)
65 years and more	59,734 (13.1%)

### ***Household By Type***

Total Households	182,847 (100%)
Family Households (families)	116,330 (63.6%)
With own children <18 years	56,921 (31.1%)
Married-Couple Family Households	81,807 (44.7%)
With own children <18 years	35,798 (19.6%)
Female Householder, No Husband Present	26,838 (14.7%)
With own children <18 years	17,002 (9.3%)

# Lucas County Profile

## *General Demographic Characteristics* (Source: U.S. Census Bureau, Census 2000)

### *Household By Type Continued*

Families with no own children	59,031 (32.3%)
Non-family Households	66,517 (36.4%)
Householder living alone	55,074 (30.1%)
Householder 65 years and >	19,212 (10.5%)
Households With Individuals <18 years	62,383 (34.1%)
Households With Individuals 65 years and >	42,309 (23.1%)
Average Household Size	2.44 people
Average Family Size	3.03 people

### *Housing Occupancy*

Total Housing Units	196,259 (100%)
Occupied Housing Units	182,847 (93.2%)
Vacant Housing Units	13,412 (6.8%)

### *Housing Tenure*

Occupied Housing Units	182,847 (100%)
Owner-Occupied Housing Units	119,492 (65.3%)
Renter-Occupied Housing Units	63,360 (34.7%)

# Lucas County Profile

## *Selected Social Characteristics* (Source: U.S. Census Bureau, Census 2000)

### ***School Enrollment***

Population 3 Years and Over Enrolled In School	129,500 (100%)
Nursery & Preschool	8,746 (6.8%)
Kindergarten	7,412 (5.7%)
Elementary School (Grades 1-8)	56,128 (43.3%)
High School (Grades 9-12)	25,408 (19.6%)
College or Graduate School	31,806 (24.6%)

### ***Educational Attainment***

Population 25 Years and Over	291,022 (100%)
< 9 <sup>th</sup> Grade Education	11,857 (4.1%)
9 <sup>th</sup> to 12 <sup>th</sup> Grade, No Diploma	37,842 (13.0%)
High School Graduate (Includes Equivalency)	94,008 (32.3%)
Some College, No Degree	64,245 (22.1%)
Associate Degree	21,200 (7.3%)
Bachelor's Degree	40,243 (13.8%)
Graduate Or Professional Degree	21,627 (7.4%)
Percent High School Graduate or Higher	82.9%
Percent Bachelor's Degree or Higher	21.3%

### ***Marital Status***

Population 15 Years and Over	355,014 (100%)
Never Married	105,001 (29.6%)
Now Married, Except Separated	175,395 (49.4%)
Separated	5,845 (1.6%)
Widowed	26,291 (7.4%)
Female	21,509 (6.1%)
Divorced	42,482 (12.0%)
Female	23,976 (6.8%)

### ***Grandparents As Caregivers***

Grandparent Living in Household with 1 or more own grandchildren <18 years	7,736 (100%)
Grandparent Responsible for Grandchildren	3,723 (48.1%)

### ***Veteran Status***

Civilian Population 18 Years and Over	335,638 (100%)
Civilian Veterans	42,878 (12.8%)

# Lucas County Profile

## *Selected Social Characteristics Continued* (Source: U.S. Census Bureau, Census 2000)

### *Disability Status of the Civilian Noninstitutionalized Population*

Population 5 to 20 Years	107,339 (100%)
With a Disability	10,947 (10.2%)
Population 21 to 64 Years	255,756 (100%)
With a Disability	50,274 (19.7%)
Percent Employed	54.3%
No Disability	205,482 (80.3%)
Percent Employed	78.9%
Population 65 Years and Over	56,491 (100%)
With a Disability	24,203 (42.8%)

## *Selected Economic Characteristics* (Source: U.S. Census Bureau, Census 2000)

### *Employment Status*

Population 16 Years and Over	348,524 (100%)
In Labor Force	226,450 (65.0%)
Not In Labor Force	122,074 (35.0%)
Females 16 Years and Over	184,442 (100%)
In Labor Force	108,901 (59.0%)
Population Living With Own Children <6 Years	35,865 (100%)
All Parents In Family In Labor Force	23,124 (64.5%)

### *Employment Numbers By Occupation*

Employed Civilian Population 16 Years and Over	212,019 (100%)
<b>Occupations</b>	
Management, Professional, and Related Occupations	63,701 (30.0%)
Service Occupations	33,573 (15.8%)
Sales and Office occupations	55,934 (26.4%)
Farming, Fishing, and Forestry Occupations	511 (0.2%)
Construction, Extraction, and Maintenance Occupations	17,812 (8.4%)
Production, Transportation, and Material Moving Occupations	40,488 (19.1%)

# Lucas County Profile

## *Selected Economic Characteristics Continued* (Source: U.S. Census Bureau, Census 2000)

### ***Leading Industries***

Employed Civilian Population 16 Years and Over	212,019 (100%)
Manufacturing	38,774 (18.3%)
Educational, Health and Social Services	46,342 (21.9%)
Retail Trade	25,977 (12.3%)
Construction	12,230 (5.8%)
Arts, Entertainment, Recreation, Accommodation, & Food Services	17,110 (8.1%)
Other Industries (except public administration)	10,226 (4.8%)

### ***Class of Worker***

Employed Civilian Population 16 Years and Over	212,019 (100%)
Private Wage and Salary Workers	176,330 (83.2%)
Government Workers	25,186 (11.9%)
Self-Employed Workers in Own Not Incorporated Business	10,087 (4.8%)
Unpaid Family Workers	416 (0.2%)

### ***Income In 1999***

Households	182,868 (100%)
< \$10,000	20,745 (11.3%)
\$10,000 to \$14,999	13,452 (7.4%)
\$15,000 to \$24,999	25,671 (14.0%)
\$25,000 to \$34,999	24,921 (13.6%)
\$35,000 to \$49,999	29,181 (16.0%)
\$50,000 to \$74,999	34,701 (19.0%)
\$75,000 to \$99,999	17,180 (9.4%)
\$100,000 to \$149,999	11,171 (6.1%)
\$150,000 to \$199,999	2,982 (1.6%)
\$200,000 or More	2,864 (1.6%)

### ***Median Household Income***

***\$38,004***

Families	117,008 (100%)
< \$10,000	8,542 (7.3%)
\$10,000 to \$14,999	5,501 (4.7%)
\$15,000 to \$24,999	12,664 (10.8%)
\$25,000 to \$34,999	14,333 (12.2%)
\$35,000 to \$49,999	19,496 (16.7%)
\$50,000 to \$74,999	26,846 (22.9%)
\$75,000 to \$99,999	14,640 (12.5%)
\$100,000 to \$149,999	9,837 (8.4%)
\$150,000 to \$199,999	2,679 (2.3%)
\$200,000 or More	2,470 (2.1%)

### ***Median Family Income***

***\$48,190***

# Lucas County Profile

## *Selected Economic Characteristics Continued* (Source: U.S. Census Bureau, Census 2000)

### *Income In 1999*

*Per Capita Income* \$20,518

### *Bureau of Economic Analysis Per Capita Income Figures*

BEA Per Capita Income 2001 \$28,307

BEA Per Capita Income 1991 \$19,318

BEA Per Capita Income Rank

1991 11<sup>th</sup> of the 88 Ohio counties

2001 19<sup>th</sup> of the 88 Ohio counties

(BEA PCI figures are greater than Census figures for comparable years because including deductions for retirement, Medicaid, Medicare payments, and the value of food stamps, among other things)

### *Median Earnings*

Male, Full-time, Year-Round Workers \$39,415

Female, Full-time, Year-Round Workers \$26,447

### *Poverty Status In 1999*

	<i>Number Below Poverty Level</i>	<i>% Below Poverty Level</i>
Families	12,553	17.0%
Individuals	62,026	13.9%

## *Selected Housing Characteristics* (Source: U.S. Census Bureau, Census 2000)

Median Value of Owner-Occupied Units \$90,700

Median Monthly Owner Costs (With Mortgage) \$900

Median Monthly Owner Costs (Not Mortgaged) \$294

Median Gross Rent for Renter-Occupied Units \$484

Median Rooms Per Housing Unit 5.7

Total Housing Units 196,259

Lacking Complete Plumbing Facilities 688

Lacking Complete Kitchen Facilities 712

No Telephone Service 3,722

## Lucas County Profile

<i>Unemployment Rates</i>	<i>Lucas</i>	<i>Ohio</i>	<i>U.S.</i>
September 2003	7.2%	5.5%	5.8%
July 2003	9.8%	6.4%	6.3%
July 2002	8.5%	5.8%	5.9%
July 2001	5.6%	4.5%	4.6%
October 1999	4.5%	4.0%	3.8%

(Source: Ohio Department of Job and Family Services)

### Selected Poverty Statistics

Category	Lucas	Ohio	Lucas 1990
Poverty rate (2000)	13.9%	10.6%	15.3%
Number of poor (2000)	62,026	1,170,698	69,374
Child poverty rate (Age 0-17) (2000)	20%	14.8%	21.5%
Second quarter job growth 2000-2002	-10,965	-203,212	N/A
Percent increase in new claims for unemployment insurance (2001-2002)	7.2%	-1.1%	N/A
Ohio OWF cash welfare household reductions exceeding job growth	8,798 (First quarter of 2002)	100,171 (First quarter of 2001)  96,588 (Second quarter of 2001)	1,787 (First quarter of 2001)  4,098 (Second quarter of 2001)
	1,064 (Second quarter of 2002)	157,750 (First quarter of 2002)  147,669 (Second quarter of 2002)	

(Source: Ohio Association of Community Action Agencies, The State of Poverty in Ohio, 2003)

## Adult Health Survey Demographics

Variable	2003 Sample
<b>Age</b>	
19-29	23%
30-39	19%
40-49	20%
50-59	15%
60 plus	23%
<b>Race</b>	
White	78%
African American	17%
Hispanic Origin	5%
<b>Marital Status</b>	
Married/Unmarried Couple	46%
Never been married	28%
Divorced	17%
Widow	9%
<b>Education</b>	
Less than High School Diploma	20%
High School Diploma	29%
Some college/ College graduate	52%
<b>Income</b>	
Less than \$25,000	52%
\$25,000 to \$50,000	19%
\$50,000 to \$75,000	10%
\$75,000 or more	10%
Refused to answer	10%

Note: Due to rounding, some totals equal more than 100%.



# Health Perceptions

## Key Findings

*In 2003, 57% of Lucas County adults surveyed rate their health status as excellent or very good and 52% rate their satisfaction with their overall health care as excellent or very good.*

*Conversely, 15% perceive their health as fair or poor and 16% rate their satisfaction with their overall health care as fair or poor. Nationally, females, African Americans and those with lower incomes are most likely to report fair or poor health*

*(Source: FASTATS, CDC). In Lucas County, respondents most likely to*

*be dissatisfied with the quality of their health care include those who rate their health as fair or poor, those without health insurance, African Americans and those with annual incomes under \$25,000.*

### Adult Health Status Rated Excellent or Very Good

- ◆ Lucas County 48% (2003)
- ◆ Ohio 55%
- ◆ U.S. 55%

*(Source: BRFSS 2002 for Ohio and U.S.)*

## Health Status

- ◆ Just over half (57%) of Lucas County adults surveyed rated their health as excellent or very good and 15% rated their health as fair or poor, which reflects a slight increase from the 14% reported in 1999. No variance exists between genders. Adults are more likely to rate their health as fair or poor if they:
  - Have been diagnosed with angina (39%)
  - Have been diagnosed with diabetes (36%)
  - Have an annual household income under \$10,000 (35%)
  - Have an annual household income under \$25,000 (28%)
  - Have been diagnosed with anxiety (28%)
  - Are African American (25%)
- ◆ In 2003, Lucas County adult respondents have had an average of 3.9 days of poor physical health and 4.6 days of poor mental health out of the past 30 days. These averages are higher than those reported for Lucas in 1999 (3.6 days and 3.7 days respectively) and Ohio (3.3 days and 3.4 days respectively) *(Source: BRFSS 2001 for Ohio)*. In 2003, Lucas County residents report that poor physical or mental health kept them from doing their usual activities (work, self-care, recreation) an average of 2.5 days compared to 2.2 days reported in 1999.

## Quality of Care

- ◆ In 2003, 52% of Lucas County surveyed adults rate their satisfaction with their overall health care as excellent or very good and 15% rate it fair or poor.
- ◆ Adults from the following groups of respondents are more likely to rate their satisfaction with their overall health care as fair or poor:
  - 55% of adults who rate their health as fair or poor
  - 34% of adults with an annual household income less than \$25,000
  - 29% of adult African Americans
  - 28% of uninsured adults
  - 27% of adults with an annual household income less than \$25,000

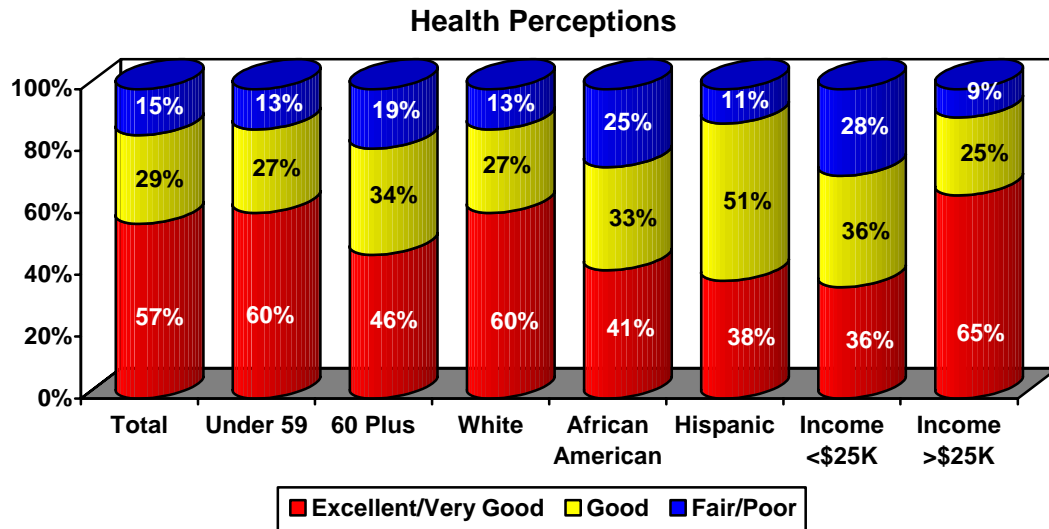
### Why is Health Status Important?

- ◆ Self-perceptions of health serve as measurements of the existent burden of chronic illness.
- ◆ People tend to seek professional care if they perceive their health as poor. This provides an estimate of the pending need for health care providers.
- ◆ Perceived health status ratings assist in evaluating a community's quality of life, identifying communities with an increased need for early diagnosis, prevention and education.

*(Source: Measuring Healthy Days, CDC)*

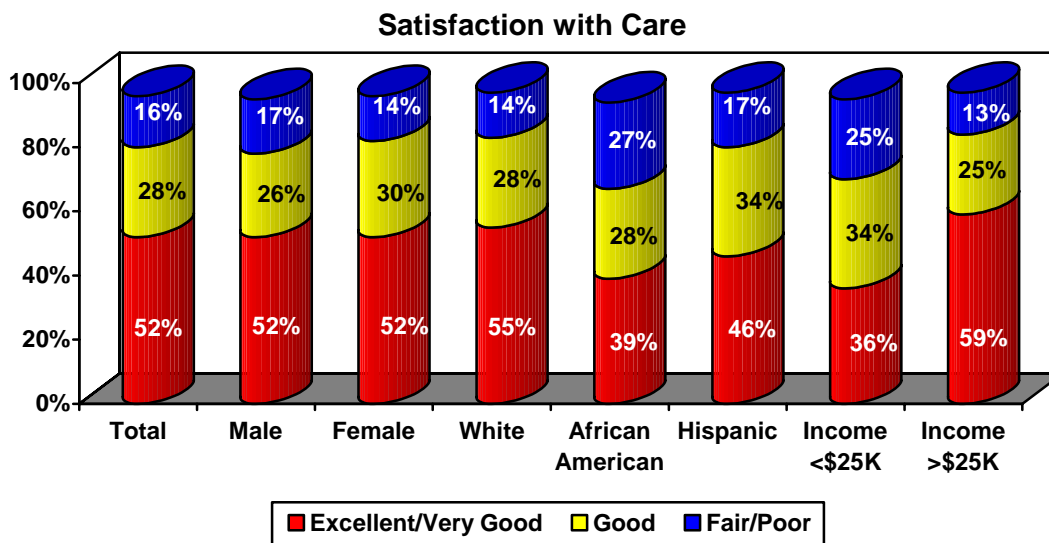
## Health Perceptions

The following graphs show the percentage of surveyed Lucas County residents who believe their health and health care are excellent/very good, good and fair/poor. They show the number of residents in each segment giving each answer (i.e., the first graph shows that 57% of all adults rated their health as excellent or very good, 60% of those under 59 gave the same rating, 46% of those 60 and older, etc.).



*\*Respondents were asked:*

*“Would you say that in general your health is excellent, very good, good, fair or poor?”*



*\*Respondents were asked:*

*“How would you rate your satisfaction with your overall health care, excellent, very good, good, fair or poor?”*  
*(Percents do not add to 100% because not all respondents answered the question.)*

# Health Care Coverage

## Key Findings

*The 2003 health assessment data have identified that 17% of all Lucas County adults currently do not have health care coverage, a significant increase from the 11% reported in 1999. Minorities, single adults and those under 50 are most likely to be without insurance. In addition, 15% of adults with children living in their household currently lack personal health care coverage. In the state of Ohio, two out of every three residents without health insurance live at or near poverty (Source: Ohio Family Health Survey Bulletin: Uninsured Rates in Ohio by County, 1998) and in Lucas County one-third of those surveyed have an annual household income under \$25,000.*

## General Health Coverage

- ◆ Currently, 82% of adult respondents have health care coverage and 17% report being uninsured. Lucas County adults are most likely to be without health care coverage if they belong to the following groups:
  - 40% of adults with an annual income of less than \$10,000 and 33% with an annual income of less than \$25,000
  - 30% of adult Hispanics
  - 28% of adult African Americans
  - 26% of adults who are unmarried
  - 23% of adult males
- ◆ According to this survey, other groups of uninsured adults include: 14% of Whites, 9% of those with incomes over \$25,000, and 7% of married adults.
- ◆ In Lucas County, 15% of surveyed adults with children living in their household do not have health insurance for themselves.
- ◆ 47% of Lucas County adult respondents who are insured have a plan through their employer, 19% have a plan through someone else's employer, 15% have Medicare and 7% have Medicaid. In 1999, 52% had insurance through their employer and nearly the same relied on Medicaid (8%).
- ◆ Most insured Lucas County adults in the survey have prescription coverage (88%), but fewer have vision (69%), dental (72%), or mental health coverage (70%). Half (50%) of adults surveyed identified that their coverage includes alcohol and drug addiction services.

## Lucas County and Ohio Comparison

	Lucas	Ohio
Percent of population enrolled in Medicaid (2001)	19%	15%
Percent of population below poverty (2000)	14%	11%
Percent of Medicaid pregnant women with 2 or more risk factors for poor birth outcomes (2000)	72%	56%
Percent very low birth weight babies born to Medicaid eligible pregnant women (2000)	2%	1.5%
Percent of statewide Medicaid expenses (2001)	5%	N/A
Percent of Healthy Family/Healthy Start population enrolled in Medicaid HMOs (2002)	96%	N/A
Percent of hospital services received outside of county (2001)	3%	27%
Percent of physician visits received outside of county (2001)	10%	32%

*(Source: Ohio Medicaid Report, January 2003 Update, Office of Ohio Health Plans (OHP), Ohio Job & Family Services)*

## Lack of Coverage

- ◆ 25% of Lucas County adults reported being without health care coverage sometime during the past year. Of those experiencing a current or past lapse in insurance said it was due to job changes (55%), lost eligibility (12%), inability to afford premiums (11%), or an inability to afford out-of-pocket costs (4%).

## 1999-2001 Ohio Children's Health Insurance Coverage Facts

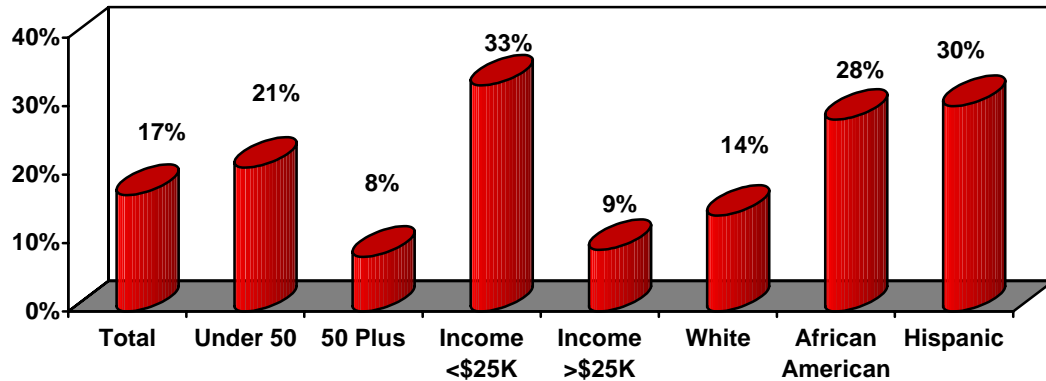
- ◆ 1999 - 18% of Ohio children were insured by Medicaid, 76% by job-based coverage and 8% were uninsured.
- ◆ 2001 - 21% of Ohio children were insured by Medicaid, 72% by job-based coverage and 8% remained uninsured
- ◆ 1999 - 41% of Ohio low-income children were insured by Medicaid, 50% through jobs and 15% were uninsured.
- ◆ 2001 - 54% of Ohio low-income children were insured by Medicaid, 36% through jobs and 15% remained uninsured.
- ◆ 2001 - The uninsured rate for children between the ages of 12-17 was twice the rate for children under 6 years.
- ◆ 2001 - A statistically significant increase in Medicaid coverage exists for children < 12 years, but not for older children.

*(Source: Data Bulletin-Children's Health Insurance Coverage in Ohio, 1999-2001)*

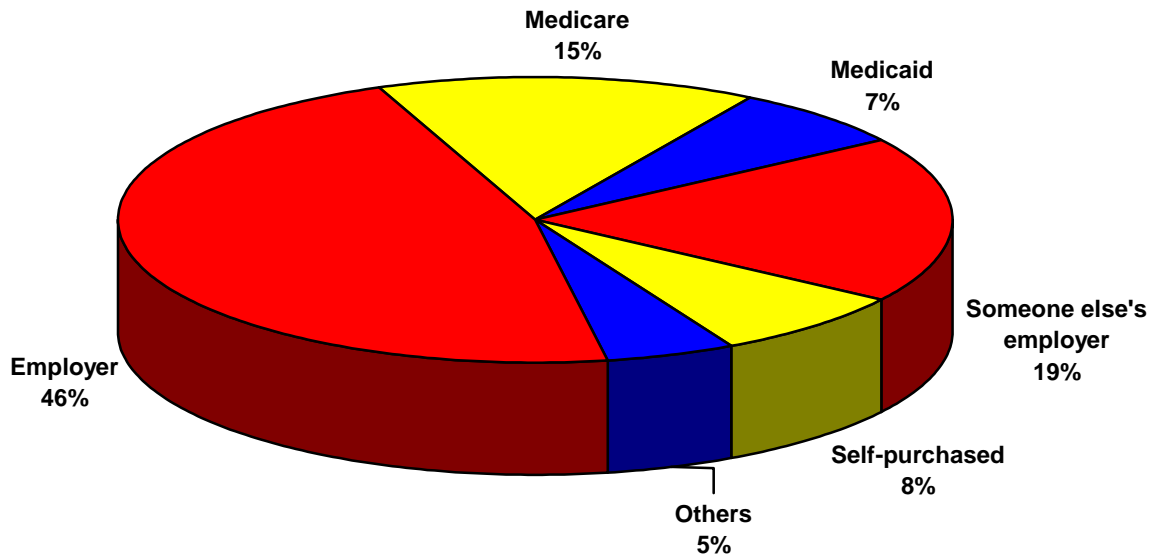
## Health Care Coverage

As identified by this survey, the following graphs show the percentage of Lucas County adults who are uninsured by segment and the most common health care providers used. The first graph shows the number of residents in each segment giving each answer (i.e., the first graph shows that 17% of all adults are uninsured, 21% of those under 50 are uninsured, 8% of those 50 and older, etc.).

**Uninsured Adults**



**Source of Health Coverage for Those Employed**



## Health Care Access

### Key Findings

*The 2003 assessment finds that 16% of Lucas County adults could not access the health care they needed at some time in the past year increasing to 45% for those who are uninsured. 83% of all adults surveyed report that they have a single person they think of as their health care provider. Two-thirds (66%) of Lucas County adults have visited a dentist or dental clinic in the past year. Lack of dental insurance and the cost of dental care were cited most often as reasons for not going to the dentist.*

### Access to Dental Care

- ◆ In the past year, 66% of Lucas County adult respondents have visited a dentist or dental clinic. African Americans (52%) and adults with household incomes below \$25,000 (43%) are least likely to have visited a dentist in the past year. Reasons most often given for not going to the dentist include lack of dental coverage (34%), perception that they don't need to go (18%), fear of going (17%), or that they couldn't afford the charges (11%).

### Availability of Services

- ◆ When Lucas County adults were asked what programs they have looked for in the past five years for themselves or a loved one, demand was highest for programs to address depression/anxiety (23%), weight problems (17%) and smoking cessation (13%) (See table next page).
- ◆ The results of this survey indicate between 72% and 83% of adults were able to access programs for depression, weight problems, alcohol abuse, drug abuse. Fifty-five percent of adults who looked for a smoking cessation program could access one. The most common reasons given for not having access to a desired program were cost issues or lack of coverage. Those in the lower income group (less than \$25,000 annual household income) were least able to access nearly all programs they sought (see table next page).

### Health Care Utilization

- ◆ In 2003, 83% of Lucas County adults surveyed say they have at least one person they think of as their health care provider decreasing to 52% among those who are uninsured.
- ◆ Survey results indicate in the past 12 months, 16% of all adults and 45% of those who are uninsured can think of a time when they needed medical care but could access it. During the same time period, 6% of adults could not access needed health care for their children, increasing to 23% of Hispanics.

### Primary Care Professionals (1998)

	Lucas	Ohio
Physician to Population ratio	1: 625	1: 874
Dentist to Population ratio	1: 2,002	1: 2,156

- ◆ In 1998, Lucas County was reported as a partial Health Professional Shortage Area for physicians.
- ◆ In 2003, Lucas County has the following licensed, inspected or certified health facilities: 9 hospitals and 37 nursing homes, 55 adult care facilities, 18 ambulatory surgical facilities, 18 residential care facilities, 5 dental care programs, 15 home health care agencies, and 9 free-standing dialysis centers.

*(Source: ODH State Health Resource Plan, 2001 and ODH Information Warehouse)*

### Predictors of Access to Health Care...

According to Healthy People 2010, adults are more likely to have access to medical care if they:

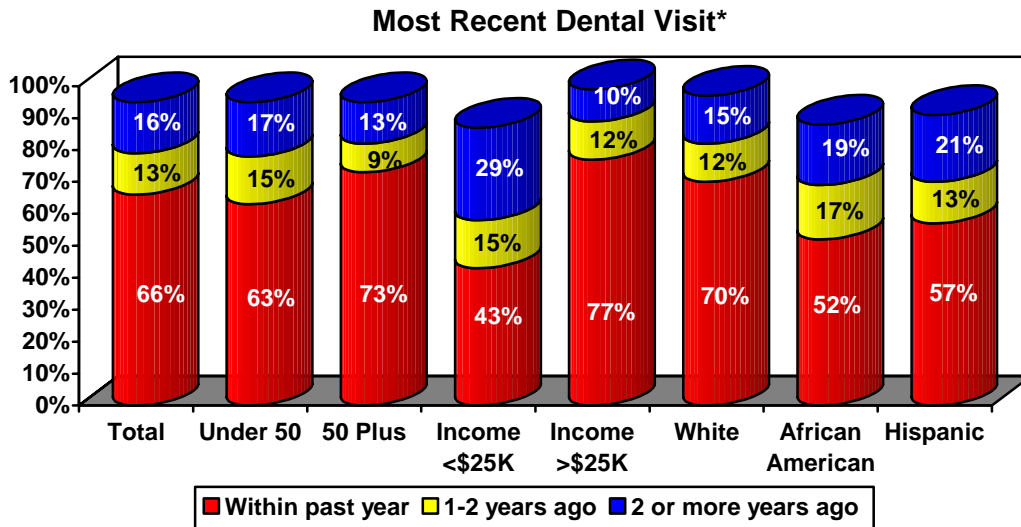
- ◆ Have a regular primary care provider
- ◆ Earn a higher income
- ◆ Have health insurance
- ◆ Utilize preventive services in a clinic setting

*(Source: Healthy People 2010 and CDC )*

## Health Care Access

Program Sought	Percent Seeking Program	Percent Able to Access	Percent Able to Access by Annual Household Income Level	
			Under \$25,000	\$25,000 Plus
Depression	23%	83%	72%	90%
Weight Control	17%	72%	58%	73%
Smoking Cessation	13%	55%	41%	62%
Alcohol Abuse	8%	80%	75%	88%
Drug Abuse	7%	81%	73%	90%

The following graph shows the percentage of surveyed Lucas County residents' most recent dental visit by several segments (i.e., the first bar shows that 66% of all adults have been to the dentist in the past year, 13% have been in the past one to two years, 63% of those under age 50 have been in the past year, 63% of those under age 50 have been in the past year, etc.).



*\*Respondents were asked:*  
*“When did you last visit a dentist or a dental clinic for any reason?”*  
*(Percents do not add to 100% because not all respondents answered the question or could not recall the answer.)*

## Health Care Access

**Please note: Direct comparisons of the data sets from the various sources and years listed in the table below are not advised due to variances in methodologies.**

Indicator	Healthy People 2010 Target	U.S. Baseline	Ohio Baseline	Lucas Co Baseline
% of persons under age of 65 years with health care insurance	100%	83% (1997)	79% age 18-24 86% age 25-34 89% age 35-44 91% age 45-54 88% age 55-64 (2002)	72% age 19-24 74% age 25-34 76% age 35-44 84% age 45-54 84% age 55-64 (2003)
% of persons who have usual source of health care	96%	87% (1998)	N/A	91% (1999)
% of persons who have one person they think of as their personal doctor or health care provider	N/A	N/A	N/A	83% (2003)
% of females who received prenatal care in first trimester	90%	83% (1998)	86% (1998) 87% (2001)	87% (1998) 89% (2001)

(Sources: Healthy People 2010, ODH Information Warehouse, 2002 BRFSS, and the 1999 and 2003 Lucas County health assessments)



# Cardiovascular Health

## Key Findings

Major cardiovascular diseases (heart disease and stroke) accounted for 41% of all Lucas County resident deaths from 1999-2001. Although age-adjusted heart disease mortality rates are declining in Lucas County, they are still higher than state averages. The 2003 health assessment has identified that 9% of Lucas County adults report they suffer from chest pains and/or diseased arteries of the heart. Lucas County age-adjusted stroke mortality rates show a declining trend since 1993, but remain above the Healthy People 2010 target.

(Source: ODH Information Warehouse )

## Lucas County Leading Causes of Death 1999-2001

**Total Deaths 13,698**

**#1 Heart Disease (4,695)**

**#2 Cancers (3,037)**

**#3 Stroke (885)**

**#4 Chronic Lung Diseases (822)**

**#5 Diabetes (441)**

(Source: ODH Information Warehouse)

## Heart Disease

- ◆ In 2003, 9% of adults surveyed were diagnosed with angina or coronary heart disease, an increase from the figure of 7% reported in 1999.
- ◆ In 1999-2001, 41% of all Lucas County deaths were caused by major cardiovascular disease (heart disease & stroke). Coronary heart diseases (CHD) include myocardial infarction (MI or heart attack), angina pectoris (chest pain), and many others. Nationally, the incidence of CHD in women occurs 10 years later than for men. The incidence of a heart attack and sudden death in women often lags behind men by 20 years. (Source: Heart Disease and Stroke Statistics-2003 Update, American Heart Association)

## High Blood Pressure (Hypertension)

- ◆ In 2003, 70% of Lucas County adults surveyed report they have had their blood pressure checked within the past six months and 87% have had it checked within the past year.
- ◆ Just over one in four (26%) Lucas County adult respondents have been diagnosed with high blood pressure, consistent with the 1999 figure of 29%. When compared to those who have not been diagnosed, adults with high blood pressure are:
  - More likely to rate their health as fair or poor (23% compared to 11%)
  - More likely to have been diagnosed with angina (20% compared to 5%)
  - More likely to be classified as obese by Body Mass Index (BMI) (42% compared to 25%)
  - More likely to be age 60 plus (47% compared to 15% of those under 60)

## High Blood Cholesterol

- ◆ Greater than two-thirds (71%) of Lucas County adults have had their blood cholesterol checked within the past five years. About 14% have never had their blood cholesterol checked.
- ◆ One in four (25%) Lucas County surveyed adults have been diagnosed with high blood cholesterol, consistent with the 1999 figure of 22%. When compared to those who have not been diagnosed, adults with high blood cholesterol are:
  - More likely to rate their health as fair or poor (21% compared to 12%)
  - More likely to have been diagnosed with angina (19% compared to 6%)
  - More likely to be classified as obese by BMI (40% compared to 26%)
  - More likely to be age 60 plus (44% compared to 16% of those under 60)

## Risk Factors for Cardiovascular Disease

- |                       |                          |                       |           |
|-----------------------|--------------------------|-----------------------|-----------|
| ◆ High blood pressure | ◆ High blood cholesterol | ◆ Sedentary lifestyle | ◆ Smoking |
| ◆ Unhealthy Diet      | ◆ Obesity                | ◆ Alcohol use         |           |

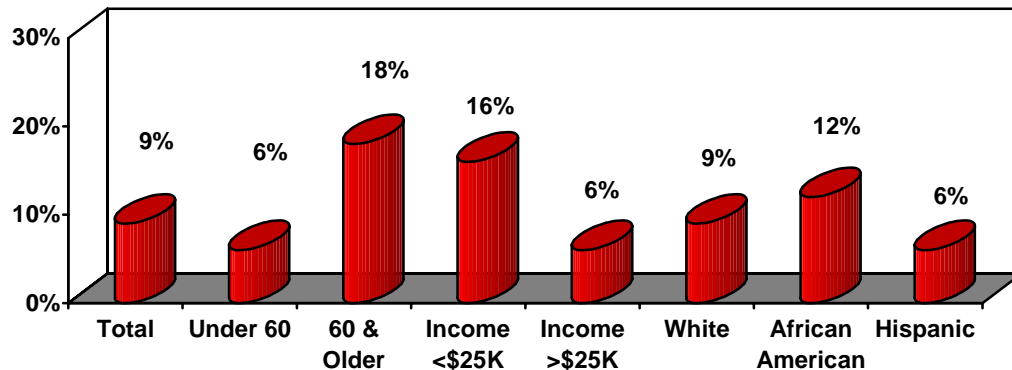
(Source: 2001 Heart and Stroke Statistical Update, American Heart Association and the CDC)



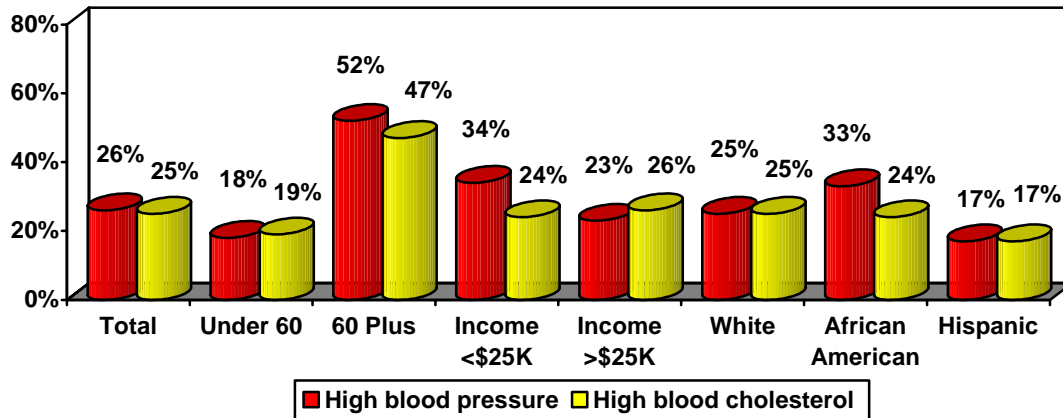
## Cardiovascular Health

The following graphs show the number of surveyed Lucas County residents who have been diagnosed with angina, high blood pressure or high blood cholesterol, and the percentage receiving blood pressure and cholesterol screenings. They show the number of residents in each segment who have been diagnosed with these health problems (i.e., the first graph shows that 9% of surveyed Lucas County adults have been diagnosed with angina or coronary heart disease, 6% of those under 60 have been diagnosed, etc.).

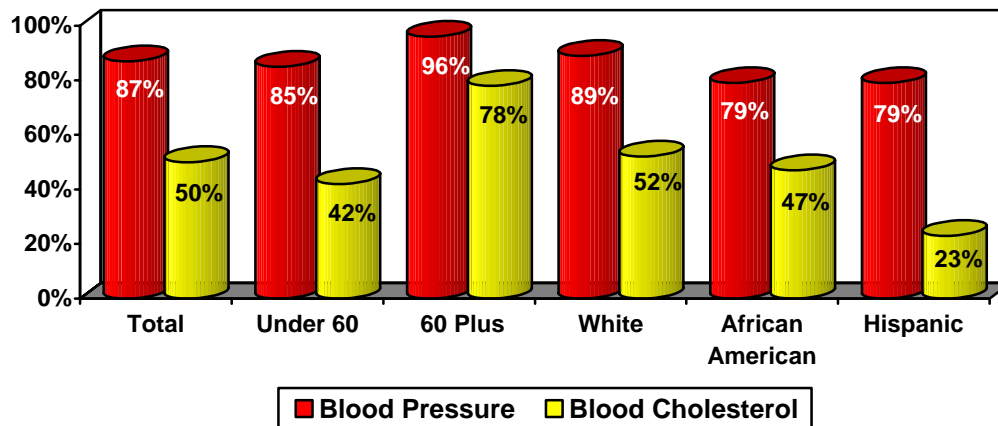
**Angina or Coronary Heart Disease**



**Diagnosed with High Blood Pressure or Cholesterol**



**Had Screening in Past Year**

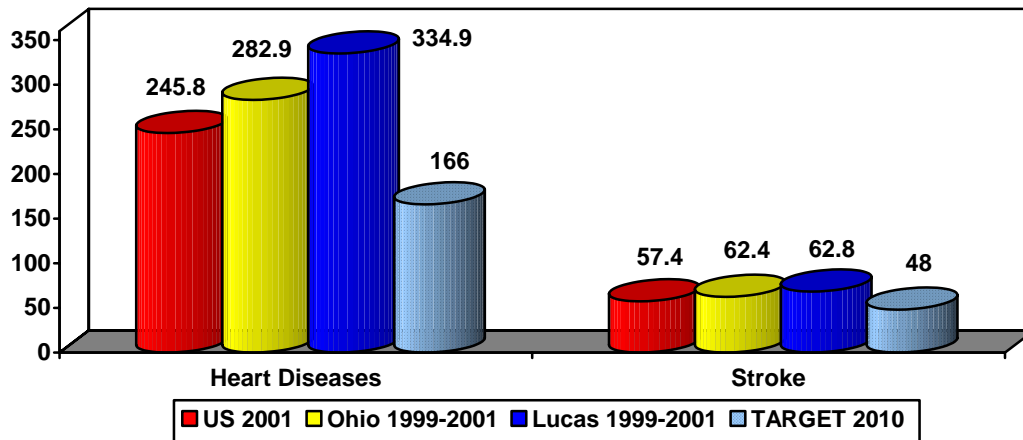


## Cardiovascular Health

The following graph shows the age-adjusted rates per 100,000 population for coronary heart disease (heart attack and chest pain or both) and stroke for the U.S., Ohio and Lucas County in comparison to the Healthy People 2010 objectives. The graph shows that:

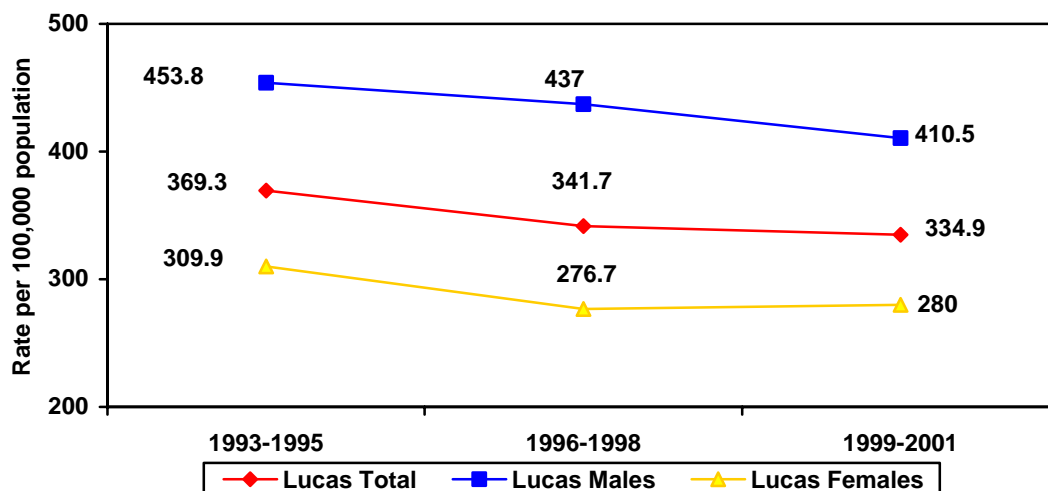
- ◆ When age differences are accounted for, the statistics indicate that Lucas County has a higher mortality rate for coronary heart disease than the state and nation. The risk of dying from a stroke for Lucas County residents is also higher than the nation and exceeds the Healthy People 2010 objective by 31%.
- ◆ African Americans have the highest age-adjusted heart disease and stroke mortality rates per 100,000 population. For detailed minority health information, please see the African American and Hispanic/Latino Health Sections of this report.

**Table 1 - Age-Adjusted Heart Disease and Stroke Mortality Rates**



*Graph reports age-adjusted rates/100,000 population, 2000 standard  
Please Note: The Healthy People 2010 Target Goal is reported for Coronary Artery Disease  
(Source: ODH Information Warehouse and the CDC FASTATS)*

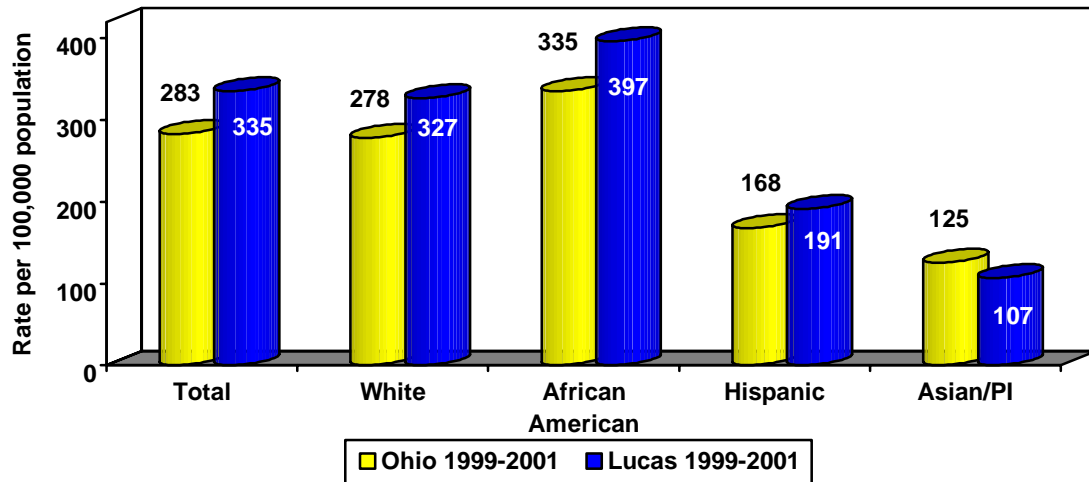
**Table 2 - Lucas County Age-Adjusted Heart Disease Mortality Rates by Gender**



*(Source: ODH Information Warehouse)*

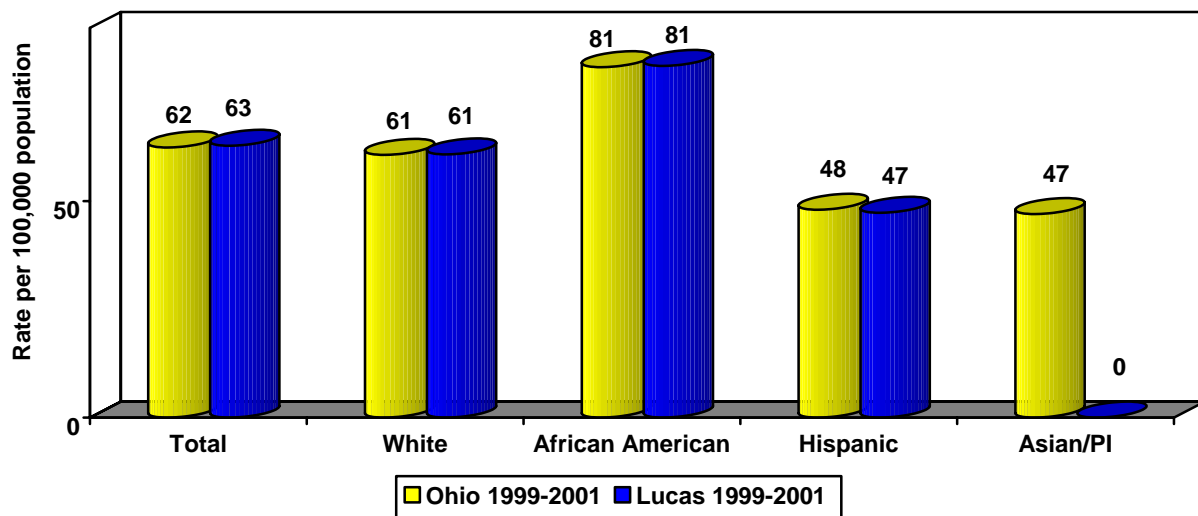
## Cardiovascular Health

**Table 3 - Age-Adjusted Heart Disease Mortality Rates by Race/Ethnicity**



(Source: ODH Information Warehouse)

**Table 4 - Age-Adjusted Stroke Mortality Rates by Race/Ethnicity**



(Source: ODH Information Warehouse)

# Cardiovascular Health

## Healthy People 2010 Objectives

### Blood Cholesterol

Objective	Target	U.S. Baseline	Lucas Baseline (2003)
Decrease proportion of adults with total high blood cholesterol	17%	21%* Adults age 20 & up with TBC>240 mg/dl (1988-94)	25%
Decrease mean total blood cholesterol levels among adults	199 mg/dl	206 mg/dl Adults age 20 and up (1988-94)	N/A
Increase proportion of adults who had their blood cholesterol checked within the preceding 5 years	80%	68% Adults age 18 and up (1998)	71%

*\* All figures age-adjusted to 2000 population standard.*

### High Blood Pressure

Objective	Target	U.S. Baseline	Lucas Baseline (2003)
Reduce proportion of adults with high blood pressure	16%	28%* Adults age 20 and older (1988-94)	26%
Increase proportion of adults with high blood pressure whose BP is under control	50%	18% Adults age 18 and up (1988-94)	N/A
Increase proportion of adults who had BP measured within the preceding 2 years and can state whether BP is normal or higher	95%	90% Adults age 18 and up (1998)	N/A
Increase proportion of adults with high BP who are taking action (i.e., losing weight, increased exercise, decreased sodium intake) to control BP	95%	82% Adults age 18 and up (1988)	N/A

*\* All figures age-adjusted to 2000 population standard.*

# Cancer

## Key Findings

*Ohio Department of Health statistics indicate that from 1993-2001, a total of 9,400 Lucas County residents died from cancer, the second leading cause of death in the county. In Ohio, 161,964 years of potential life (YPLL) were lost prematurely to this disease from 1999-2000. The American Cancer Society advises that reducing tobacco use, increasing cancer education and awareness, changing diet and exercise habits, and early detection may reduce overall cancer deaths.*

## Cancer Facts

- ◆ The Ohio Department of Health vital statistics indicate that from 1993-2001, cancers caused 23% (9,400 of 40,664 total deaths) of all Lucas County resident deaths. The largest percent (30%) of these deaths were from lung and bronchus cancer.
- ◆ Age-adjusted cancer mortality rates (calculated by ODH per 100,000 population) have declined slightly for Lucas County from 229.3 in 1996-98 to 219.1 for 1999-2001. Comparable Ohio cancer death rates also show a minimal downward trend from 301.1 for 1996-98 to 282.9 for 1999-2001.
- ◆ The American Cancer Society reports that smoking tobacco is associated with cancers of the esophagus, pharynx, oral cavity, larynx, and lung. Also, smoking has been associated with cancers of the bladder, cervix, kidney, pancreas, stomach, uterus, and certain types of leukemia.

## Lung Cancer

- ◆ ODH reports that lung cancer was the leading cause of male cancer deaths (1,641) from 1993-2001. Colon, rectum, and anus cancer followed with 509 deaths during the same time period and prostate cancer was a close third (503 deaths). In Lucas County, 33% of male adults are current smokers<sup>1</sup> and 38% report that somebody has smoked tobacco in their home in the past month. (Source: 2003 Lucas County Health Assessment)
- ◆ According to the American Cancer Society, smoking causes 87% of lung cancer deaths in the U.S. In addition, individuals living with smokers have a 30% greater risk of developing lung cancer than those who do not have smokers living in their household.

## Breast Cancer

- ◆ The Ohio Department of Health reports that lung cancer was the leading cause of female cancer deaths (1,197) followed by breast (737) and colon & rectum (525) cancers in Lucas County from 1993-2001. Approximately 24% of female adults in the county are current smokers<sup>1</sup> and 31% report that somebody has smoked tobacco in their home in the past month. (Source: 2003 Lucas County Health Assessment)
- ◆ 56% of Lucas County females over the age of 18 have had a clinical breast examination in the past year and 76% have had one in the past two years. (Source: 2003 Lucas County Health Assessment)
- ◆ If detected early, the 5-year survival rate for breast cancer is 97%. (Source: American Cancer Society Facts & Figures 2003).

### Lucas County Incidence of Cancer, 2000

- ◆ All Types: 2,067 cases
  - ◆ Lung and Bronchus: 359 cases
  - ◆ Colon and Rectum: 237 cases
  - ◆ Breast: 289 cases
  - ◆ Prostate: 309 cases
- From 1999-2001, there were 3,037 cancer deaths in Lucas County.**

*(Source: Ohio Cancer Incidence Surveillance System and ODH Information Warehouse)*

### Risk Factors for Cancer:

- ◆ Tobacco Use
- ◆ Physical Inactivity
- ◆ Overweight and Obesity
- ◆ Unhealthy Diet

*(Source: American Cancer Society)*

<sup>1</sup> Have smoked over 100 cigarettes in lifetime and currently smoke some or all days.

# Cancer

## Colon and Rectum Cancer

- ◆ Digestive cancers accounted for 22% of all cancer deaths in Lucas County from 1993-2001. About half (54%) of all digestive cancers for Lucas County women were colon-related and 25% involved the pancreas. Among men in Lucas County, 47% of all digestive cancers involved the colon and 20% were pancreatic cancers. *(Source: ODH Information Warehouse)*
- ◆ The American Cancer Society reports several risk factors for colorectal cancer including: age, personal or family history of colorectal cancer, polyps, or inflammatory bowel disease, alcohol use, a high-fat or low-fiber diet, physical inactivity, obesity, not eating enough fruits and vegetables, and smoking.
- ◆ In the U.S., most cases of colon cancer occur to individuals over the age of 50. Because of this, the American Cancer Society suggests that every person over the age of 50 have regular colon cancer screenings. Only 56% of Lucas County adults over age 50 report having been screened for colorectal cancers. Most screenings have been within the past two years.

## Prostate Cancer

- ◆ ODH reports that prostate cancer deaths accounted for 10% of all male cancer deaths from 1993-2001 in Lucas County.
- ◆ African American men are 60% more likely than white American men to develop prostate cancer. In addition, over 70% of prostate cancers occur in men over the age of 65. Other risk factors include family history and nationality. Prostate cancer is more common in North America and Northwestern Europe occurring rarely in Central or South America. *(Source: Cancer Facts & figures 2003, The American Cancer Society)*

### Lucas County Cancer Deaths 1993-2001

Type of Cancer	Number of Cancer Deaths	Percent of Total Cancer Deaths
Lung and Bronchus	2,838	30%
Colon, Rectum & Anus	1,034	11%
Other Digestive Cancers	1,009	11%
Breast	740	8%
Prostate	503	5%
Lymphomas	441	5%
Urinary System	453	5%
Ovary	224	2%
Leukemia	321	3%
Brain	198	2%
Melanoma of Skin	113	1%
Cervix and Uterus	182	2%
Oral	237	3%
Multiple Myeloma	176	2%
Other/Unspecified	931	10%
Total	9,400	100%

(Source: ODH Information Warehouse)

# Cancer

## Lucas County Cancer Incidence Statistics, 1996-2000

Year	All Sites	Female Breast	Colon & Rectum	Lung	Prostate
1996	2,055	292	283	395	243
1997	2,203	291	268	386	325
1998	2,224	342	266	376	313
1999	2,282	312	270	405	322
2000	2,067	289	237	359	309

(Source: Ohio Cancer Incidence Surveillance System)

## Estimated Lucas County Cancer Statistics, 2003

Estimated Number in 2003	All Sites	Female Breast	Colon & Rectum	Lung	Prostate
New cancer cases	2,139	354	228	273	350
Cancer deaths	910	71	91	273	44
People who will eventually develop cancer	185,889	31,497	26,393	30,534	36,337
People who will eventually die of cancer	96,744	7,301	10,557	24,664	7,000

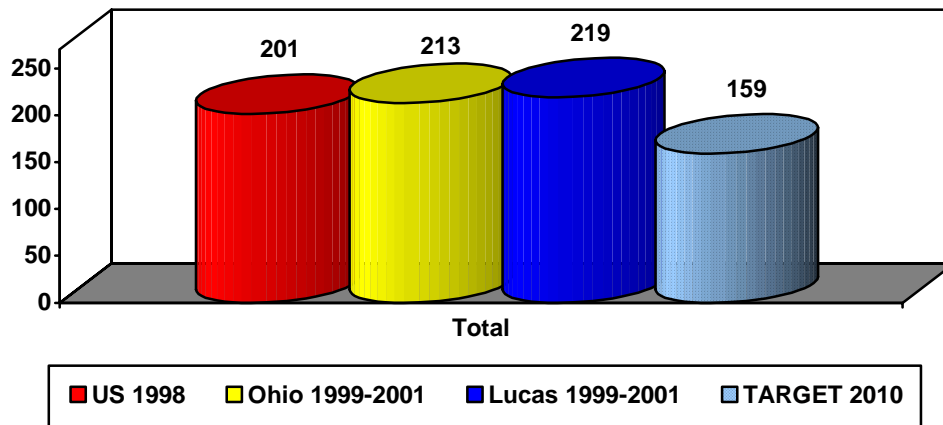
**Note:** Estimates calculated for Lucas County are based on 2000 U.S. Census population figures for the county and suggested equation multiples from the *Cancer Facts & Figures 2003* published by the American Cancer Society (ACS). ACS cautions: "These figures provide only a rough approximation of the number of people in a specific community who may develop or die of cancer. These estimates should be used with caution because they do not reflect the age or racial characteristics of the population, access to detection and treatment, or exposure to risk factors." The American Cancer society recommends using data from state cancer registries, when it is available, for the most accurate local cancer statistics.

## Cancer

The following graph shows the U.S., Ohio and Lucas County age-adjusted mortality rates (per 100,000 population, 2000 standard) for all types of cancer in comparison to the Healthy People 2010 objective. The graph indicates that:

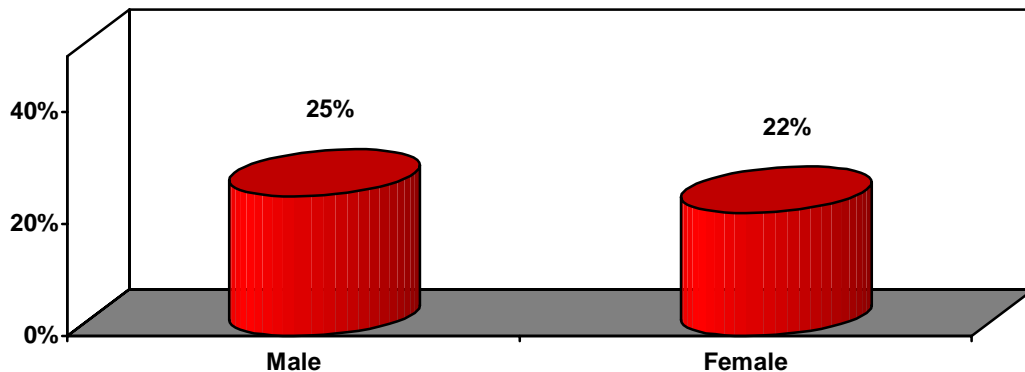
When age differences are accounted for, the statistics show that Lucas County has a higher mortality rate for cancer than the state. The Lucas rate exceeds the Healthy People 2010 target objective.

**Healthy People 2010 Objective  
and Age-Adjusted Rates for All Cancers\***



*\*Age-adjusted rates/100,000 population, 2000 standard  
(Source: ODH Information Warehouse)*

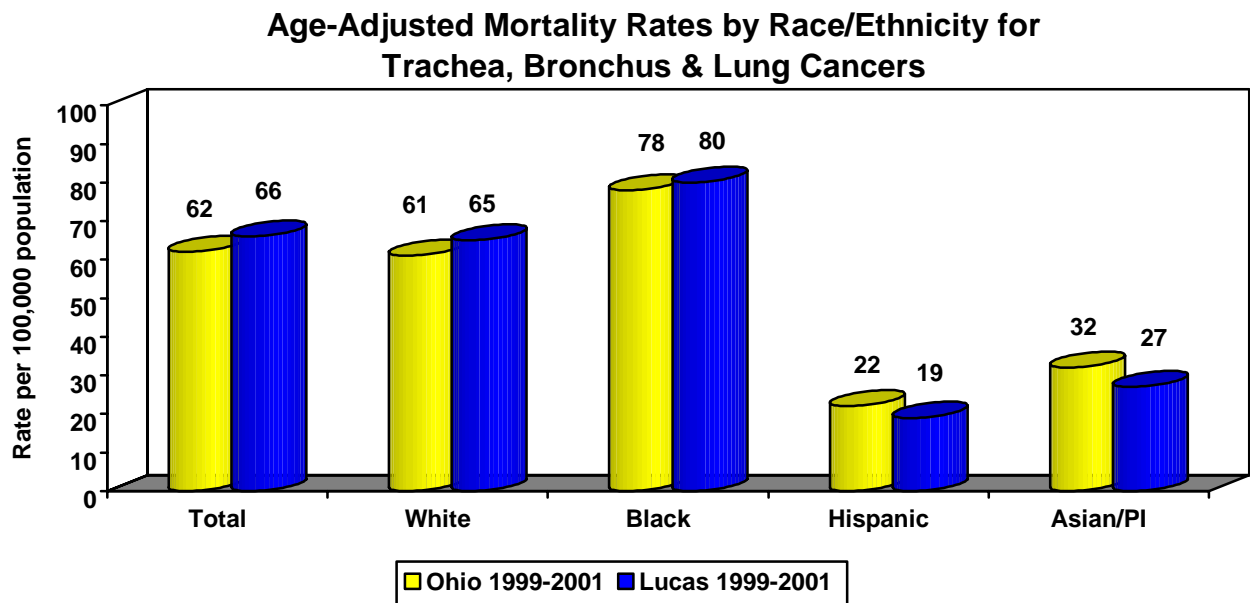
**Cancer As Percent of Total Deaths by Gender, 1993-2001**



*(Source: ODH Information Warehouse)*



## Cancer



(Source: ODH Information Warehouse)

# Arthritis, Asthma, & Diabetes

## Key Findings

*The 2003 assessment has identified that 26% of Lucas County adults have been diagnosed with arthritis, which is consistent to the 1999 figure of 27%. The Centers for Disease Control (CDC) estimate that one of every three U.S. adults is affected by arthritis or chronic joint symptoms.*

## Facts of Life

- ◆ Diabetes was the 5<sup>th</sup> leading cause of death in Lucas County during 1993-2001.
  - ◆ Two-thirds of individuals suffering from diabetes die from cardiovascular disease.
- (Source: American Heart Association, ODH Information Warehouse)*

*In the 1999 health assessment report, 12% of Lucas County adults had been diagnosed with asthma, increasing to 13% in 2003 and to 15% for those under 60 years of age. Asthma was the primary reason for 9.3 million visits to physicians' offices throughout the United States in 2000. (Source: CDC, Advance Data From Vital and Health Statistics, Number 328, June 5, 2002)*

*In 2003, 9% of Lucas County adults surveyed have been diagnosed with diabetes (also 9% in 1999). The CDC reports that age-adjusted prevalence of diagnosed diabetes increased over 10% in 47 of the 50 U.S. states between 1994 and 2001. An American Diabetes Association study reported that direct medical costs resulting from diabetes reached \$92 billion in 2002 and indirect medical costs such as disability, work loss, and premature mortality were approximately \$40 billion.*

## Arthritis

- ◆ Just over one-quarter (26%) of Lucas County adult respondents have been diagnosed with arthritis. This figure exceeds the national Healthy People 2010 target rate of 21%. According to this survey, the following groups of Lucas County adults are most likely to have been diagnosed with arthritis:
  - 49% of adults ages 60 and older
  - 48% of adults diagnosed with high blood pressure
  - 44% of adults diagnosed with high blood cholesterol
  - 36% of adults who are obese by Body Mass Index (BMI)
  - 29% of females

## Asthma

- ◆ In Lucas County, 13% of all surveyed adults have been diagnosed with asthma. Those most likely to be affected include 15% of adults under age 60 and 17% of adults considered obese by BMI.

## Diabetes

- ◆ 9% of Lucas County surveyed adults (trended with 8% Ohio and 7% U.S. adults, 2002 BRFSS) have been diagnosed with diabetes. Diabetes diagnoses are more common among the following groups of respondents:
    - 21% of adults who have been diagnosed high blood cholesterol
    - 21% of adults who have been diagnosed with high blood pressure
    - 18% of adults ages 60 and older
    - 17% of adults who are considered obese by BMI
  - ◆ Diabetes was the 5<sup>th</sup> leading cause of death for all Lucas County residents (1,196 deaths) from 1993-2001.
- (Source: ODH Information Warehouse )*

### Risk Factors for Arthritis

- |                  |                                    |                       |
|------------------|------------------------------------|-----------------------|
| ◆ Obesity        | ◆ Sedentary lifestyle              | ◆ Increasing age      |
| ◆ Family history | ◆ Female gender                    | ◆ Certain occupations |
| ◆ Infections     | ◆ Occupational and sports injuries |                       |

*(Source: National Arthritis Action Plan: A Public Health Strategy, Arthritis Foundation, Association of State and Territorial Health Officials, and CDC 1999)*

### Risk Factors for Diabetes

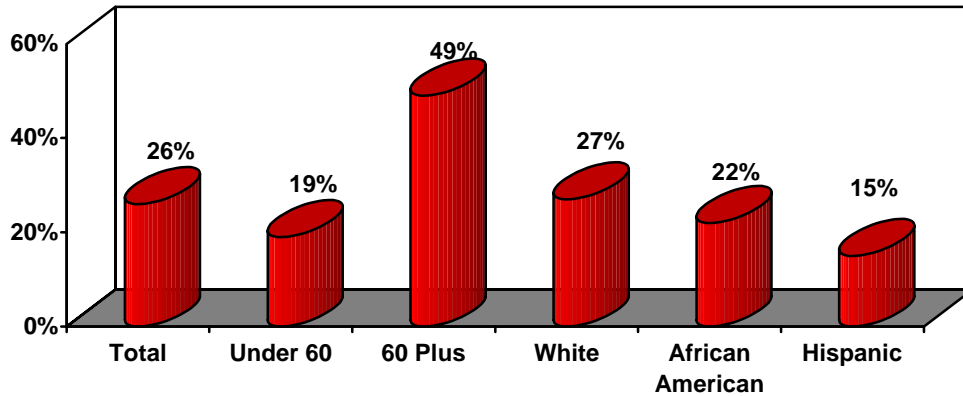
- |                             |                            |   |
|-----------------------------|----------------------------|---|
| ◆ High blood glucose levels | ◆ Racial/Ethnic background | ◆ Family history                          |
| ◆ High blood cholesterol    | ◆ High blood pressure      | ◆ Sedentary lifestyle                     |
| ◆ Gestational diabetes      | ◆ Obesity                  | ◆ Giving birth to a baby 9 lbs or greater |

*(Source: National Institute of Diabetes & Digestive & Kidney Disease, 2001; American Diabetes Association)*

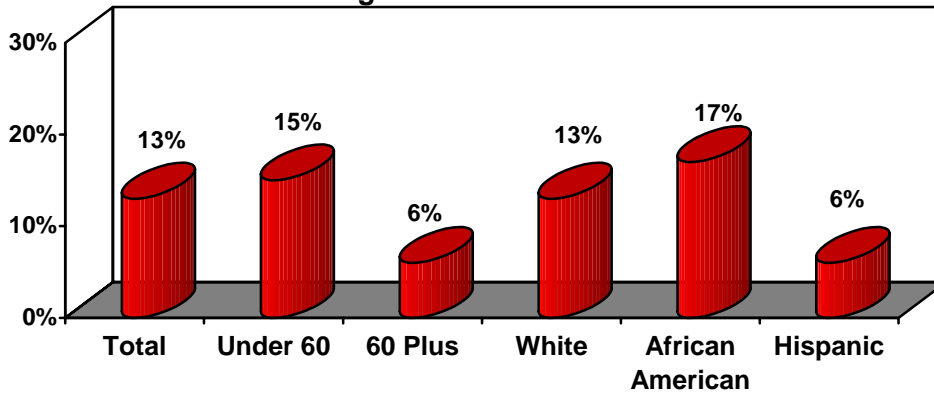
## Arthritis, Asthma, and Diabetes

The following graphs show the percentage of surveyed Lucas County residents who have been diagnosed with diabetes, asthma or arthritis. The data are segmented by age and ethnicity (i.e., the first graph shows that 26% of all adults have been diagnosed with arthritis, 19% of adults under age 60 have been diagnosed, 49% of adults 60 and older, etc.).

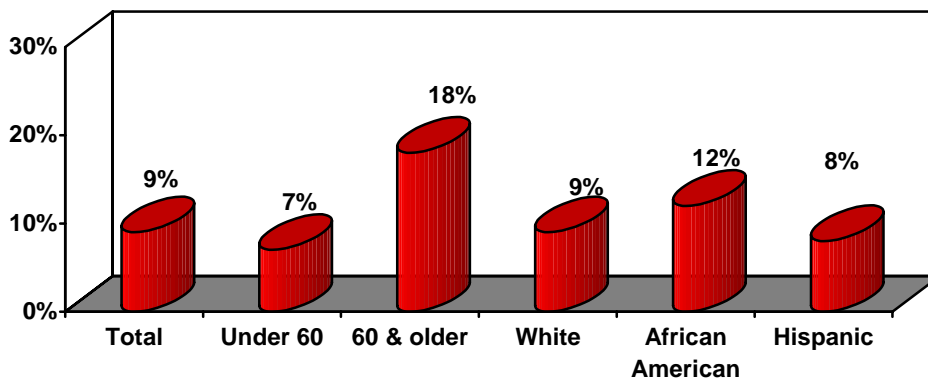
**Diagnosed with Arthritis**



**Diagnosed with Asthma**



**Diagnosed with Diabetes**



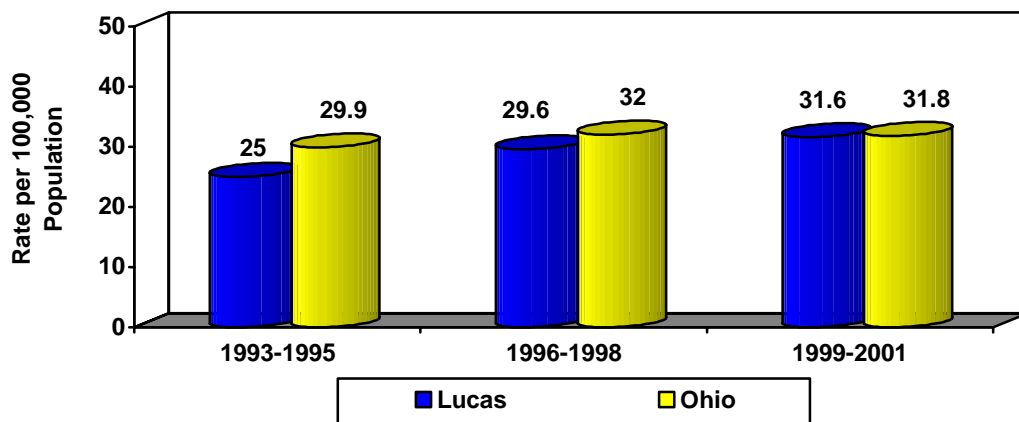
# Diabetes

Disparities in diabetes exist among ethnic/racial groups not only on a national level, but also within Lucas County, where African Americans are more likely to have been diagnosed with diabetes (12% compared to 9% of Whites).

The following graphs show age-adjusted deaths from diabetes for Lucas County and Ohio with comparison to the Healthy People 2010 target objective.

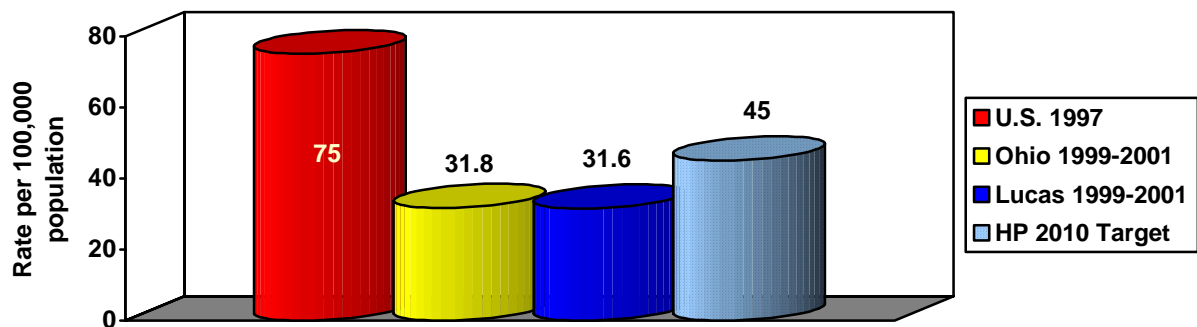
- ◆ Lucas County's age-adjusted diabetes mortality rates have increased for each reporting period from 1993 to 2001 (Table 1).

**Table 1 - Diabetes Age-Adjusted Mortality Rates**



(Source: ODH Information Warehouse)

**Table 2 - Healthy People 2010 Objectives and Age-adjusted Mortality Rates for Diabetes**

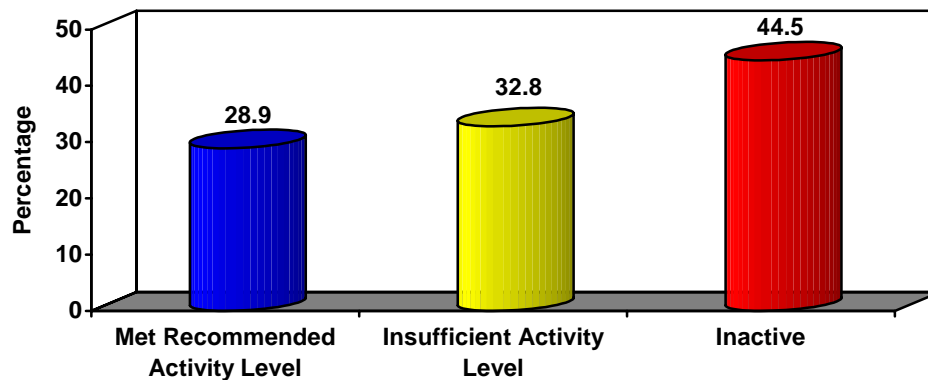


Age-adjusted rates calculated with 2000 population standards  
(Source for graphs: ODH Information Warehouse, Healthy People 2010, CDC)

# Arthritis

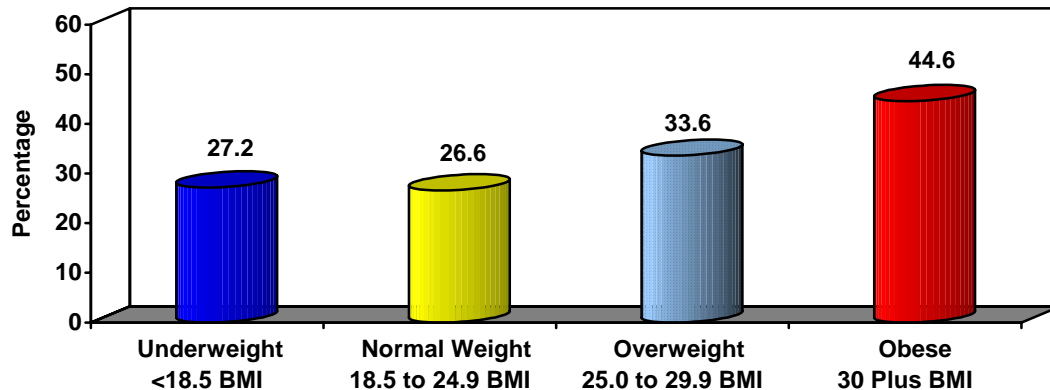
- ◆ What can be done about arthritis? Suggestions from the *National Arthritis Action Plan: A Public Health Strategy* include: (Source: Arthritis Foundation, Association of State and Territorial Health Officials and Centers for Disease Control and Prevention, 1999)
  - Increase public awareness of arthritis as the leading cause of disability and an important public health problem.
  - Prevent arthritis whenever possible.
  - Promote early diagnosis and appropriate management for people with arthritis to ensure them the maximum number of years of healthy life.
  - Minimize preventable pain and disability due to arthritis.
  - Support people with arthritis in developing and accessing the resources they need to cope with their disease.
  - Ensure that people with arthritis receive the family, peer and community support needed.
- ◆ The following graphs demonstrate the prevalence of arthritis and chronic joint symptoms among U.S. adults by physical activity level and by weight classification.

**Table 3 - Prevalence of Arthritis or Chronic Joint Symptoms Among U.S. Adults By Physical Activity Level 2001**



(Source: Centers for Disease Control, National Center for Chronic Disease Prevention and Health Promotion, Health Topics A to Z)

**Table 4 - Prevalence of Arthritis or Chronic Joint Symptoms Among U.S. Adults By Body Mass Index (BMI) 2001**

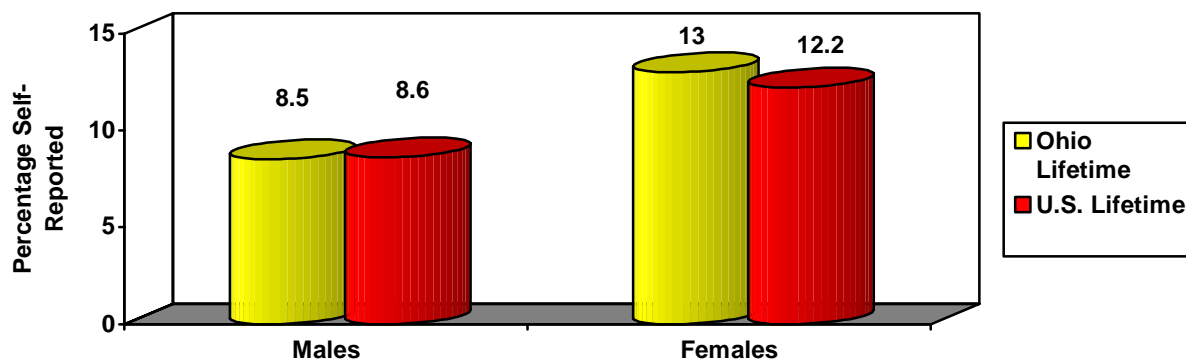


(Source: Centers for Disease Control, National Center for Chronic Disease Prevention and Health Promotion, Health Topics A to Z)

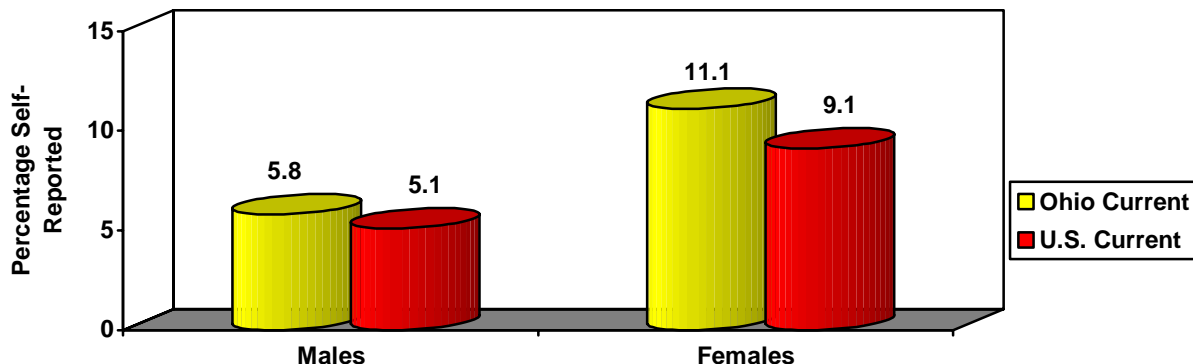
# Asthma

- ◆ What can be done to address asthma? Recommendations from the CDC's *National Asthma Control Program* include:
  - Tracking: routinely collect and analyze asthma data to determine who is most affected in Lucas County.
  - Interventions: assure that research-based public health practices and programs are implemented to reduce the burden of asthma within the county.
  - Partnerships: make sure that all stakeholders have the opportunity to be involved in developing, implementing and evaluating the local asthma control programs.
- ◆ For youth, the CDC has published *Strategies for Addressing Asthma Within a Coordinated School Health Program, 2002*. The six strategies identified include:
  - Establishing management and support systems for asthma-friendly schools.
  - Providing appropriate school health and mental health services for students with asthma.
  - Providing asthma education and awareness programs for students and school staff.
  - Providing a safe and healthy school environment to reduce asthma triggers.
  - Coordinating school, family and community efforts to better manage asthma symptoms and reduce school absences among students with asthma.

**Table 5 - Adult Lifetime Asthma Prevalence Rates By Gender 2000**



**Table 6 - Adult Current Asthma Prevalence Rates By Gender 2000**



(Source: Data from BRFSS 2000, reported by Air Pollution and Respiratory Health Branch, National Center for Environmental Health, Centers for Disease Control and Prevention)

# Weight Control

## Key Findings

*In 2003, 60% of Lucas County adults surveyed are overweight or obese when their height and weight is compared to the Body Mass Index (BMI) for males and females. The prevalence of obesity in Lucas County adults (29%) exceeds the 2002 BRFSS statistics reported for Ohio (23%) and the U.S. (22%) and the figures are consistent with the 1999 health assessment. The 2003 health assessment shows that Lucas County adults are not eating the recommended servings of fruits and vegetables each day and over half need to increase their amount of weekly exercise to reach CDC recommended levels in the summer, increasing to nearly two-thirds in winter. Weight problems are expected to eventually become the leading preventable cause of death in the United States, surpassing tobacco use. (Source: CDC, National Center for Chronic Disease Prevention and Health Promotion, Nutrition & Physical Activity)*

## Defining the Terms

- ◆ Obesity: An excessively high amount of body fat compared to lean body mass.
- ◆ Body Mass Index (BMI): The contrasting measurement/relationship of weight to height. CDC uses this measurement to determine overweight and obesity.
- ◆ Overweight: Adults with a BMI of 25 to 29.9.
- ◆ Obese: Adults with a BMI of 30 or greater.

(Source: CDC)

## Adult Weight Control

- ◆ The 2003 health assessment has identified that three-fifths (60%) of Lucas County adults are overweight (33%) or obese (27%).
- ◆ The percent of overweight adults in Lucas County have remained close to the percents from 1999 (36% overweight, 29% obese).
- ◆ In Lucas County, 47% of surveyed Lucas County adults are trying to lose weight and 45% are either trying to maintain their weight or are not doing anything about their weight. The following groups are most likely to say they are trying to lose weight:
  - Obese adults (75%)
  - Females (57%)
  - Whites (49%)
- ◆ Fifty-four percent of Lucas County adult respondents are eating fewer calories or less fat and 49% are using physical activity or exercise to lose weight or keep from gaining weight.
- ◆ Thirty-eight percent of adults surveyed ate fruit at least once per day during the past week, 40% had fruit a maximum of three times in the past week, and even fewer, 28%, drank 100% fruit juice at least once in the past seven days. Low percentages of adults reported eating vegetables such as green salad (16%), potatoes (11%) and carrots (9%) at least once a day in the past week and an even larger percentage did not eat these vegetables at all in the past seven days (14% eat green salad, 18% eat potatoes, and 36% eat carrots, respectively).
- ◆ In 2003, 29% of adults report that they drink at least one glass of milk per day. Nearly one-quarter (22%) of adults have not had any milk in the past week.
- ◆ Just under one-half (48%) of Lucas County adult respondents meet or exceed the Centers for Disease Control and American College of Sports Medicine moderate and/or vigorous weekly exercise guidelines during summer months decreasing to 37% in the winter.
- ◆ A near equal number of surveyed males (47%) and females (49%) are participating in recommended amounts of moderate and/or vigorous exercise each week.

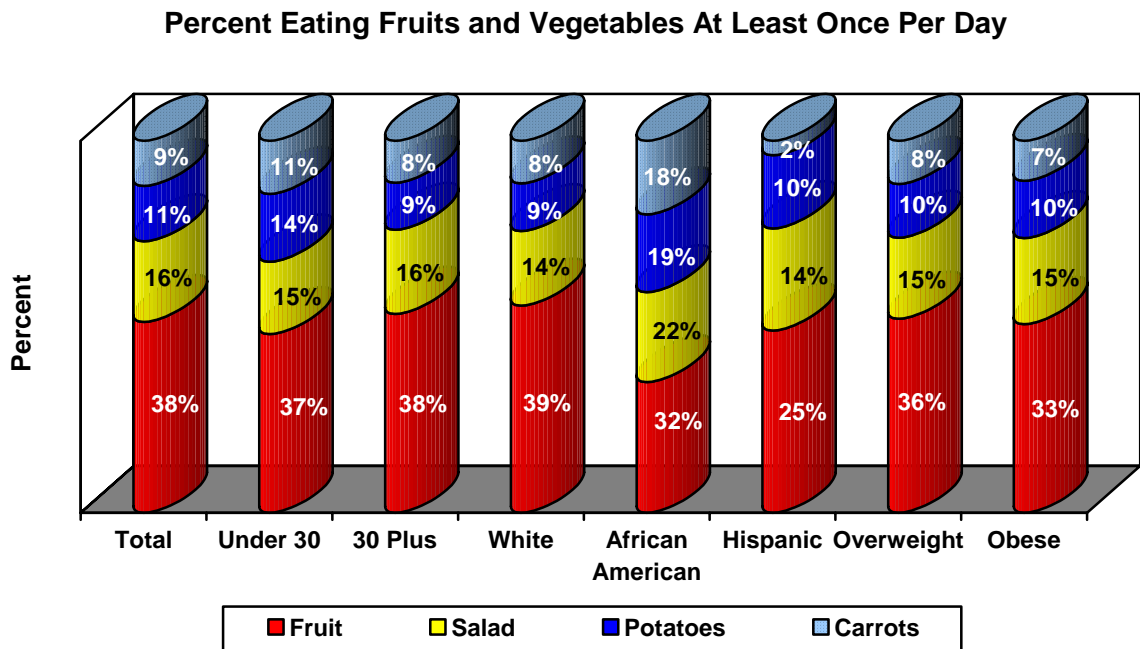
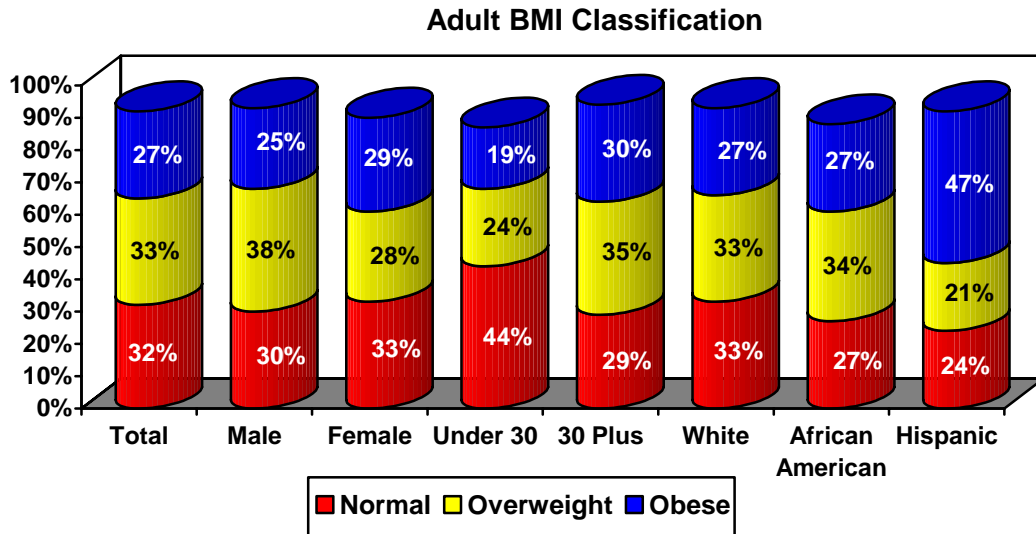
## The Risks of Being Obese...

- |                                   |                           |   |
|-----------------------------------|---------------------------|---|
| ◆ Type II Diabetes                | ◆ Insulin resistance      | ◆ Heart disease                         |
| ◆ Congestive heart failure        | ◆ Gallstones              | ◆ Osteoarthritis                        |
| ◆ Cancer, especially colon cancer | ◆ High blood pressure     | ◆ Gout                                  |
| ◆ High blood cholesterol          | ◆ Chest pain              | ◆ Stroke                                |
| ◆ Obstructive sleep apnea         | ◆ Pregnancy complications | ◆ Infertility, poor reproductive health |
| ◆ Difficulty with bladder control |                           | ◆ Psychological disorders               |

(Source: Health Topics A-Z, CDC)

## Weight Control

The following graphs show the percentage of Lucas County adults surveyed who are overweight or obese and the percentage who are not exercising/not eating the recommended servings of fruits and vegetables. The graphs show the number of residents in each segment, which gave each answer (i.e., the first graph shows that 32% of surveyed adults are classified as normal weight and 33% are overweight, etc.).

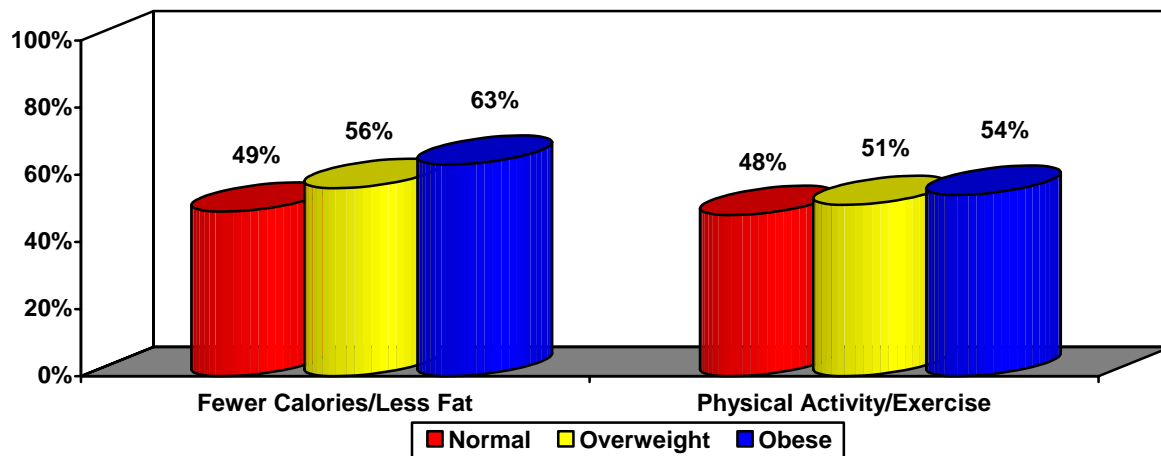


*The National Academy of Sciences, the U.S. Department of Agriculture, the National Cancer Institute and the American Cancer Society recommend that adults eat 5-9 servings of fruits and vegetables per day to reduce the risk of cancer and to maintain good health.*

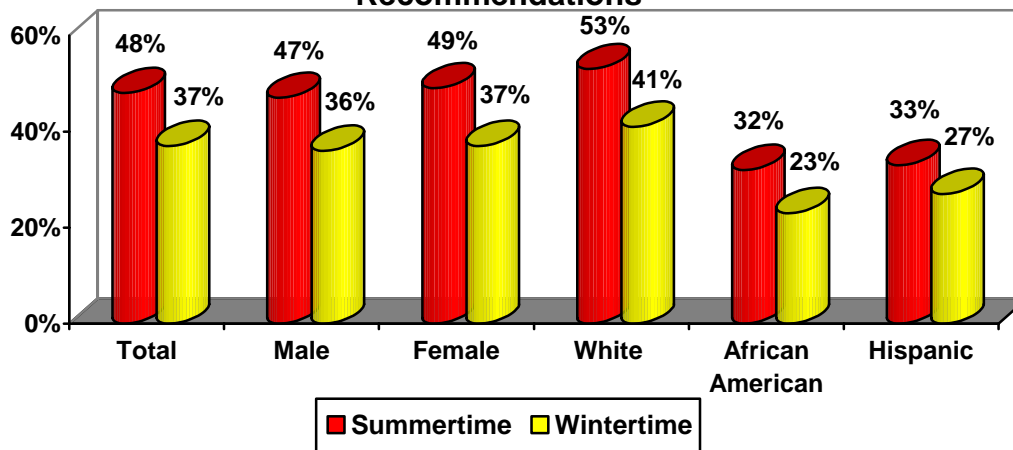


# Weight Control

**Weight Control Behaviors**



**Percent of Adults Who Meet or Exceed Weekly Exercise Recommendations\***



\* The Centers for Disease Control and Prevention and the American College of Sports Medicine recommend that adults participate in moderate exercise for at least 30 minutes on five or more days of the week or vigorous exercise for 20 minutes or more on three or more weekdays.

# Tobacco Use

## Key Findings

*The 1999 Lucas County health assessment reported that 27% of adults were current smokers and in 2003 this figure was measured at 29%. One reason for this increase may be that the number of adults who were considered former smokers in 1999 (29%) has decreased to 20% in 2003. One additional finding was that exposure to secondhand smoke within the home was reported by 34% of all adults. The American Cancer Society (ACS) estimates that tobacco use will be linked to over 180,000 cancer deaths in 2003. (Source: Cancer Facts & Figures, American Cancer Society, 2003 and 2002.)*

## Adult Tobacco Use Behaviors

- ◆ 29% of Lucas County adults surveyed are current smokers (those respondents who reported smoking at least 100 cigarettes in their lifetime and currently smoke some or all days) and 20% are former smokers (smoked at least 100 cigarettes in their lifetime and now do not smoke). The 2002 BRFSS reports a smoking rate of 23% for the U.S. and 27% for Ohio. In 2000, the CDC reported that the percent of daily smokers in the Toledo Metro area at 31% and in 2003, the rate of current smokers for the area had dropped to 20% with Lucas County measured at 27%. Adult current smokers tend to belong to the following groups:
  - 54% of adults with an annual household income under \$10,000
  - 46% of single parents
  - 45% of adults with an annual household income under \$25,000
  - 42% of adults who rate their health as fair or poor
  - 38% of unmarried adults
  - 36% of adults ages 19 to 29
  - 33% of adult males
- ◆ The current smoking rate for Lucas County adults is 29% in 2003, previously reported at 27% by earlier health assessment efforts. In 1999, 55% of all adults reported having smoked at least 100 cigarettes in their lifetime while in 2003 the rate was 49%. Another difference here is that in 2003, only 20% of this segment has quit smoking while in 1999, 29% were considered former smokers.
- ◆ According to this survey, African American and Hispanic smokers average fewer cigarettes per day (13 and 12 cigarettes respectively) in comparison to Whites (18 cigarettes per day). On average, Lucas County adults smoke an average of 18 cigarettes per day, which, is similar to 1999.
- ◆ 34% of Lucas County adults report being exposed to secondhand smoke in their home in the past month, increasing to 43% of adults under the age of 30 and 50% of those with an annual household income less than \$25,000.
- ◆ In this survey, 37% of adults with children age 18 or younger living in their home stated that someone has smoked in their home during the past 30 days and this number increases to 48% among single parents.
- ◆ 75% of Lucas County smokers are interested in quitting smoking. Females (82%) express a greater desire than males (69%). Whites (75%) and Hispanics (76%) are less interested in quitting than African Americans (84%).
- ◆ In both 1999 (74%) and 2003 (75%) surveys, three out of four adult smokers have actually tried to quit smoking.
- ◆ 16% of Lucas County mothers who gave birth in the last five years smoked during their most recent pregnancy.

## Tobacco Use and Health

- ◆ Tobacco use is the most preventable cause of death in the U.S.
- ◆ 87% of all lung cancers in the U.S. can be attributed to smoking.
- ◆ Each year in the U.S., secondhand smoke may be responsible for approximately 3,000 lung cancer deaths in adults who do not smoke themselves.
- ◆ The lung cancer mortality rates for current smokers are 15 times higher than for those who have never smoked.
- ◆ Tobacco use is associated with cancer of the cervix, mouth, pharynx, esophagus, pancreas, kidney and bladder.
- ◆ Tobacco use contributes to heart disease, stroke, bronchitis, emphysema, COPD, chronic sinusitis, severity of colds, pneumonia and low birth weight in infants.

*(Source: Cancer Facts & Figures, American Cancer Society, 2003 and 2002.)*

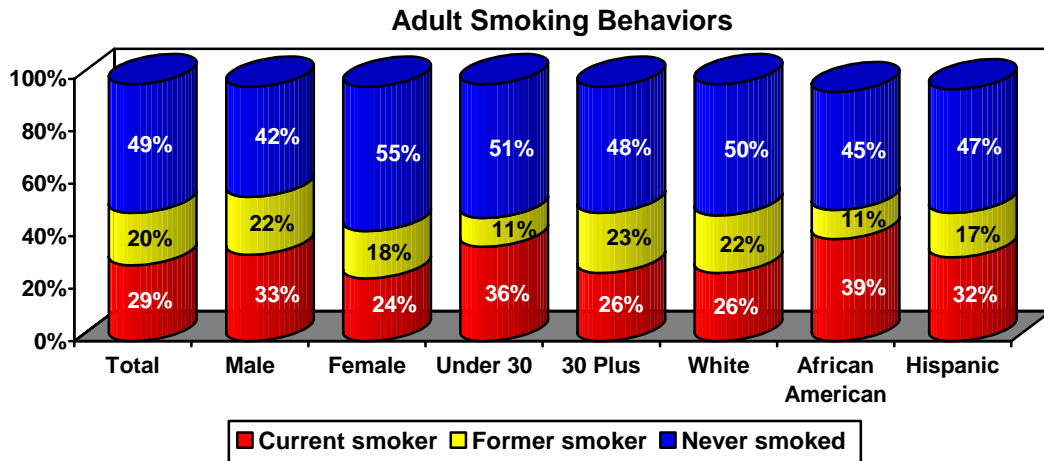
## Some Health Benefits of Quitting Smoking

- ◆ 20 minutes after quitting smoking, the blood pressure drops to a level close to that before the last cigarette and the temperature of the hands and feet increases, returning to normal.
- ◆ 8 hours after quitting smoking, the carbon monoxide level in the blood drops to normal.
- ◆ One year after quitting, the risk for heart disease is reduced by 50%.
- ◆ Ten years after quitting, the risk of dying of lung cancer is about ½ that of a continuing smoker's.

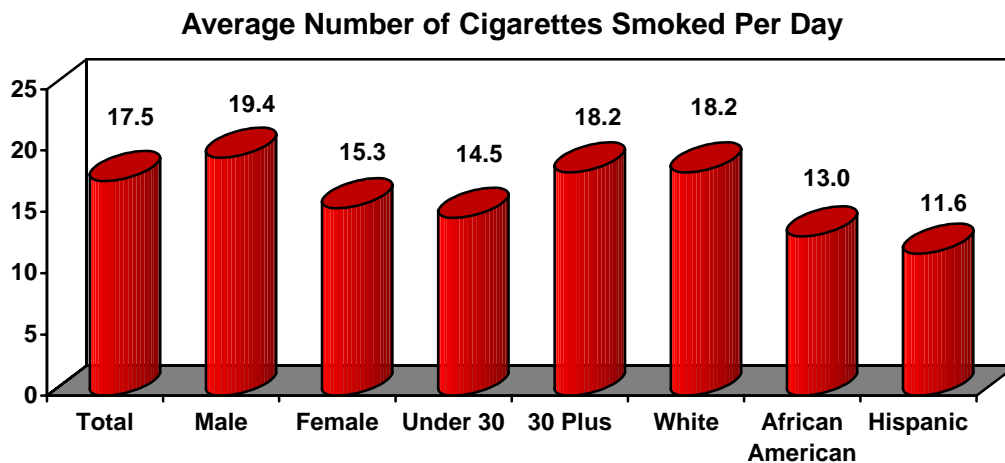
*(Source: The Nat'l Women's Health Info Center, project of the U.S. Dept. of Health and Human Services, Office on Women's Health, [www.4woman.gov](http://www.4woman.gov))*

## Adult Tobacco Use

The following graphs show the percentage of surveyed Lucas County adults using tobacco and the amount used on average. The bars show the percentage of each segment giving each answer (i.e., the first graph shows that 29% of all adults are current smokers, 20% of all adults are former smokers, 49% have never smoked, 33% of males are current smokers, 24% of females are current smokers, etc.).



*Respondents were asked:*  
*“Have you smoked at least 100 cigarettes in your entire life?”*  
*If yes, do you now smoke cigarettes everyday, some days or not at all?”*  
*(Percents do not add to 100% because not all respondents answered the question.)*



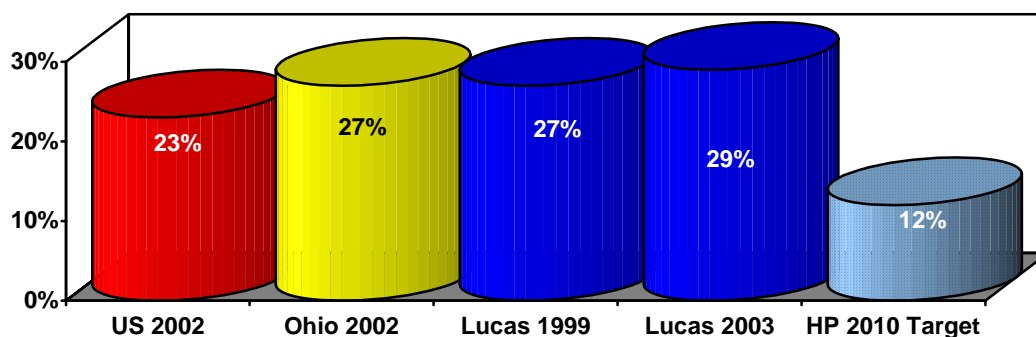
*Respondents were asked:*  
*“On average, how many cigarettes a day do you smoke?”*

## Adult Tobacco Use

The following graphs show the 1999 and 2003 health assessment adult cigarette smoking rates and the Lucas County and U.S. age-adjusted mortality rates per 100,000 population for chronic lower respiratory diseases (formerly COPD) and trachea, bronchus and lung cancers in comparison with the Healthy People 2010 objectives. Please note that the BRFSS rates shown for Ohio and the U.S. are for adults 18 years and older. These graphs show that:

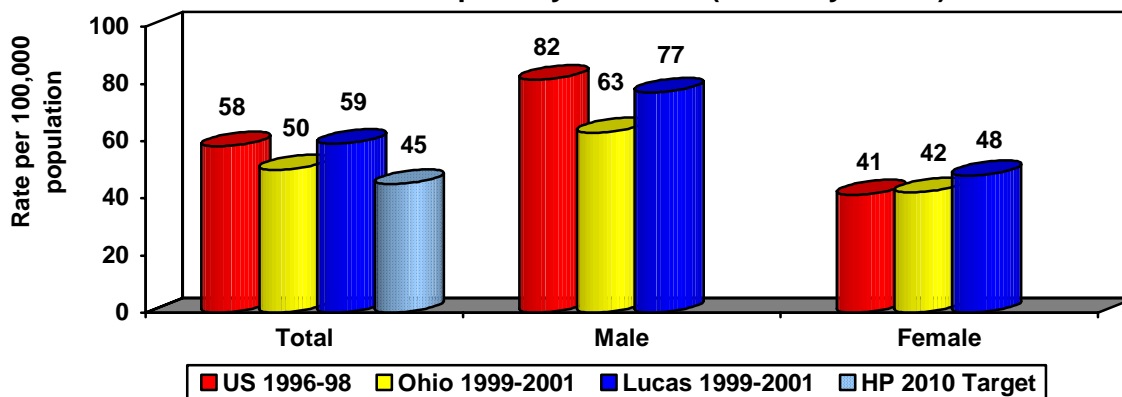
- ◆ The 2003 smoking rate for Lucas County has increased since 1999 and it remains higher than Ohio and the U.S. The 2003 rate of 29% is 2.5 times higher than the Healthy People 2010 objective of 12% (Table 1).
- ◆ The age-adjusted chronic lower respiratory disease (formerly COPD) mortality rates in Lucas County are higher than Ohio. Large disparities in rates exist by gender in Lucas County and the nation. The County rate for males is 60% higher than for females in 1999-2001. The rates for Lucas County Hispanic/Latinos and Native Americans are approximately half of those for African Americans and Whites (Table 2 and Table 3).
- ◆ Large rate disparities exist by gender for Lucas County trachea, bronchus, and lung cancer age-adjusted mortality rates with males 82% higher than females (Table 7).
- ◆ Large rate disparities exist by race for Lucas County trachea, bronchus, and lung cancer age-adjusted mortality rates. African Americans have the highest and Hispanic/Latinos have the lowest rates reported within the county (Table 8).
- ◆ The percentage of all mothers who smoked during pregnancy in Lucas County has remained at or near 20% from 1998-2001.

**Table 1 - Healthy People 2010 Objectives & Cigarette Smoking Rates**



(Source: Lucas County Health Assessments (1999 & 2003), Healthy People 2010, CDC, and ODH Information Warehouse)

**Table 2 - Age-Adjusted Mortality Rates for Chronic Lower Respiratory Diseases (Formerly COPD)**

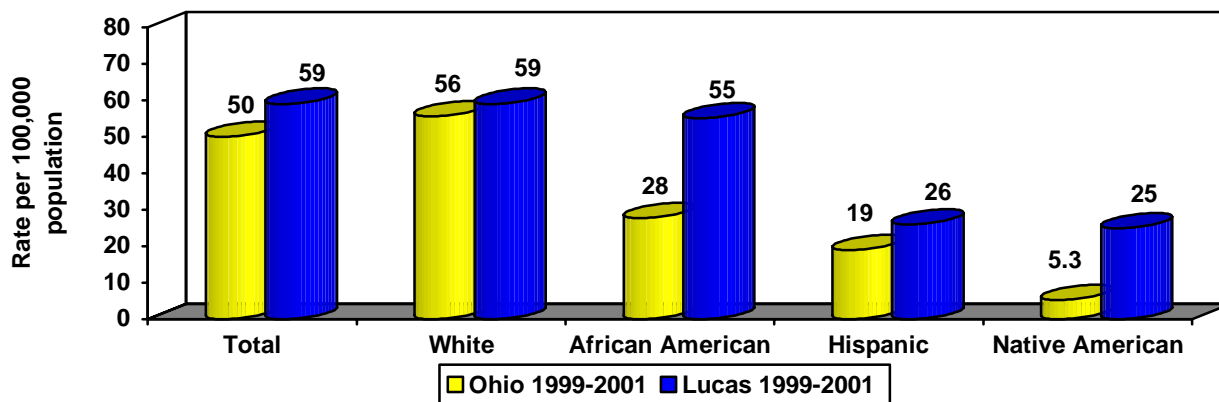


(Source: ODH Information Warehouse)

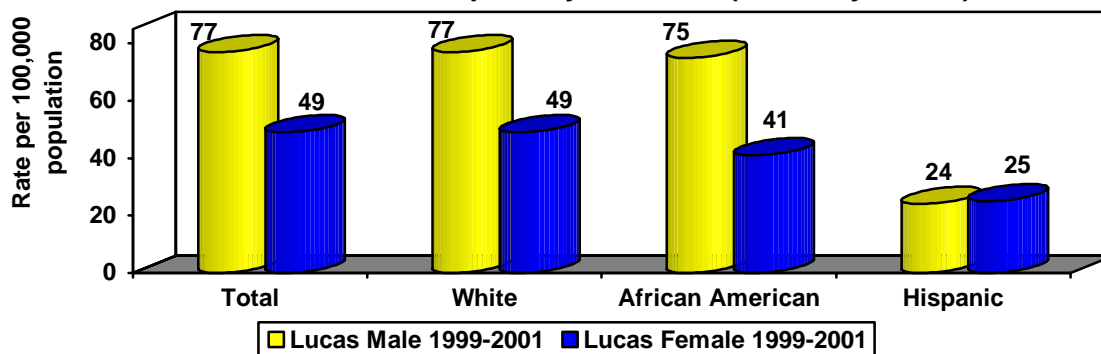
Age adjusted mortality rates calculated with 2000 population standards

## Adult Tobacco Use

**Table 3 - Age-Adjusted Mortality Rates by Race/Ethnicity for Chronic Lower Respiratory Diseases (Formerly COPD)**

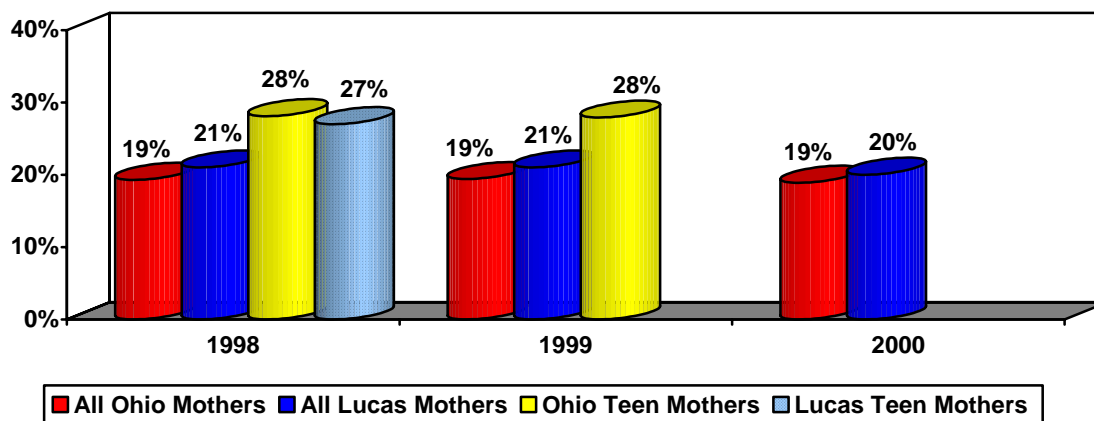


**Table 4 - Age-Adjusted Mortality Rates by Race/Ethnicity and Gender for Chronic Lower Respiratory Diseases (Formerly COPD)**



(Source for graphs: ODH Information Warehouse)  
All age-adjusted rates calculated with 2000 population standards

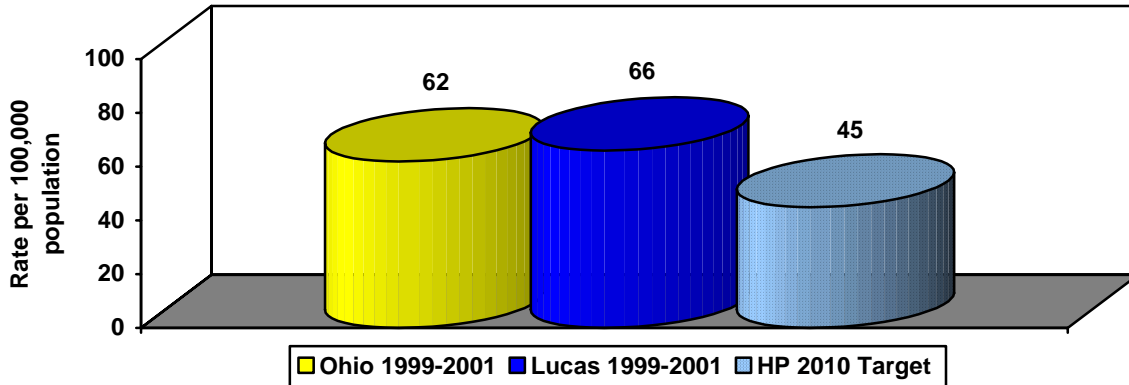
**Table 5 - Births to Mothers Who Smoked During Pregnancy\***



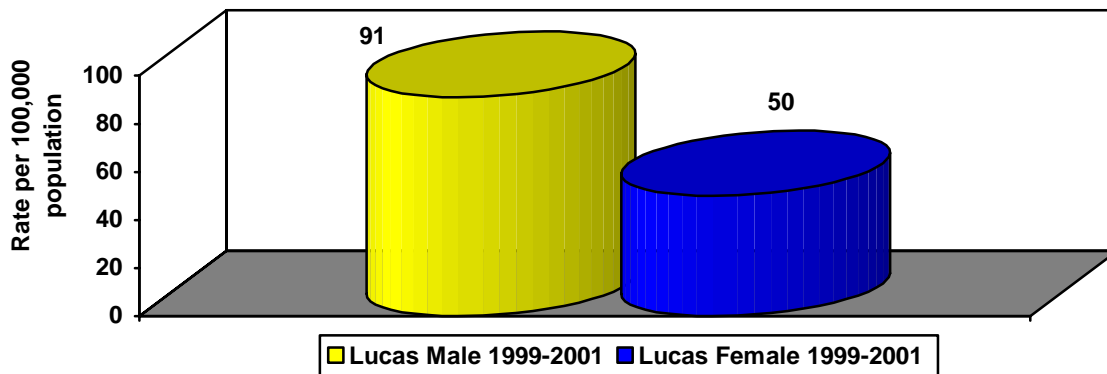
\*1999 & 2000 teen birth smoking rates not available at time of publishing  
(Source: ODH Data Warehouse)

## Adult Tobacco Use

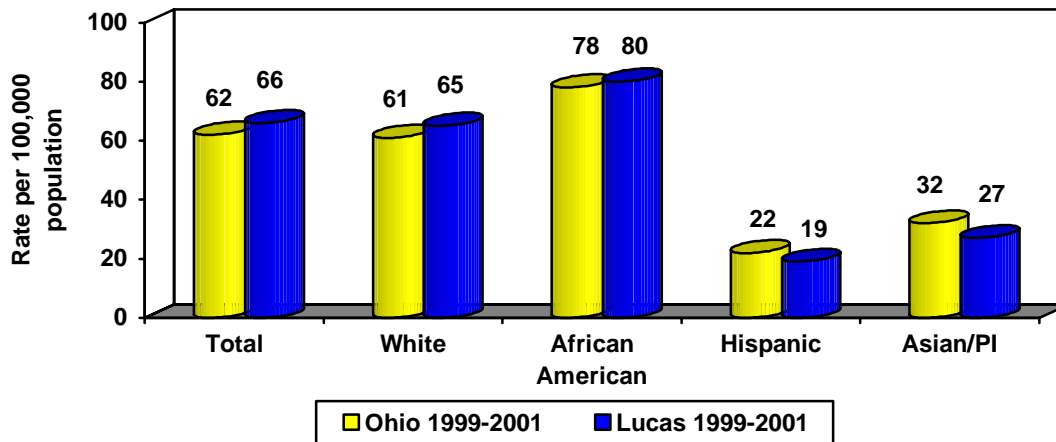
**Table 6 - Age-Adjusted Mortality Rates for Trachea, Bronchus & Lung Cancer**



**Table 7 - Age-Adjusted Mortality Rates by Gender for Trachea, Bronchus & Lung Cancer**



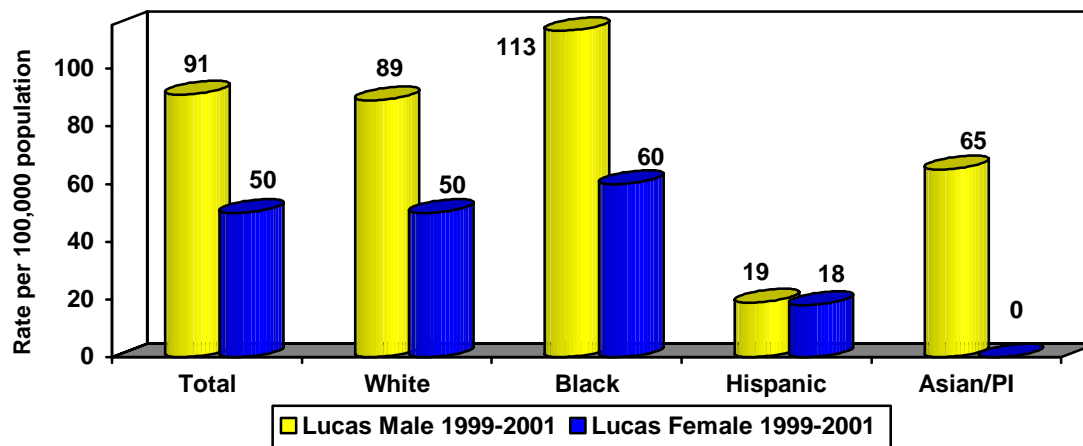
**Table 8 - Age-Adjusted Mortality Rates by Race/Ethnicity for Trachea, Bronchus & Lung Cancers**



(Source for graphs: ODH Information Warehouse)  
All age-adjusted rates calculated with 2000 population standards

## Adult Tobacco Use

**Table 9 - Age-Adjusted Mortality Rates by Race/Ethnicity  
for Trachea, Bronchus & Lung Cancers**



(Source: ODH Information Warehouse)

# Alcohol Consumption

## Key Findings

*The results of the 2003 health assessment indicate that 34% of adults who drink consumed five or more drinks on at least one occasion in the past month and are considered binge drinkers. For those 19 to 29 years old, the number increases to 56%. A little more than half (59%) of the adults who drink average two drinks per occasion while some (13%) average five or more drinks on days they had alcohol. Just under one-third (32%) of adults who drink reported symptoms commonly associated with alcohol addiction and 5% of all Lucas County adults surveyed report that they have driven after perhaps having too much to drink in the past month. Habitual use of alcohol is a risk factor for cancer, cardiovascular disease, diabetes, liver disease and neurological damage. Drinking during pregnancy is also related to birth defects and infant mortality. Nationally, alcohol consumption is involved in nearly half of all deaths from motor vehicle crashes and intentional injuries. (Source: CDC, National Center for Chronic Disease Prevention and Health Promotion)*

## Alcohol and Driving 2001 and 2002

- ◆ In 2001, there were 1,385 adult and 24 juvenile DUI arrests reported for Lucas County.
- ◆ 547 alcohol-related traffic crashes occurred in Lucas County during 2002.
  - 45% of these accidents were injury crashes resulting in 397 injuries
  - 8 of these crashes were fatal resulting in 9 deaths.
- ◆ In 2002, the Lucas County alcohol-related accident rate is reported at 1.2 per 1,000 people. Ohio's rate for the same time period is 1.5 per 1,000 population.

*(Sources: Ohio Department of Public Safety and University of Virginia Library, Geospatial & Statistical Data Center, Uniform Crime Reports)*

## Alcohol Consumption

- ◆ Just over half (51%) of Lucas County adults surveyed have had at least one alcoholic drink in the past month and 18% are frequent drinkers, defined as drinking an average of three or more days per week during the past month.
- ◆ According to this survey, 59% of those who drink average one or two drinks per occasion and 12% average six or more per occasion.
- ◆ Just over one-third (34%) of those who drink report having five or more alcoholic drinks on an occasion in the last month. These drinkers tend to belong to the following groups of respondents:
  - 56% of males ages 19 to 29 (compared to 29% of those ages 30 and over)
  - 45% of adult males (compared to 24% of females)
  - 49% of unmarried adults (compared to 23% those who are married)
- ◆ Based on this survey, 12% of all Lucas County adult respondents report symptoms commonly associated with alcohol addiction such as drinking more than expected (7%) or needing to drink more to get the same effects (3%).

## Drinking and Driving

- ◆ 5% of all Lucas County adult respondents said that in the past month they have driven after perhaps having too much to drink.

## Lucas County Adult Alcohol Consumption Statistics for 1999

- ◆ 30% of adult drinkers have binged one or more times in the past month
- ◆ 37% of 19-29 year olds have binged one or more times in the past month
- ◆ 50% of adults who drink average one or two drinks per occasion
- ◆ 8% of adults average six or more drinks on the days they had alcohol
- ◆ 5% of adults reported driving after perhaps having too much to drink

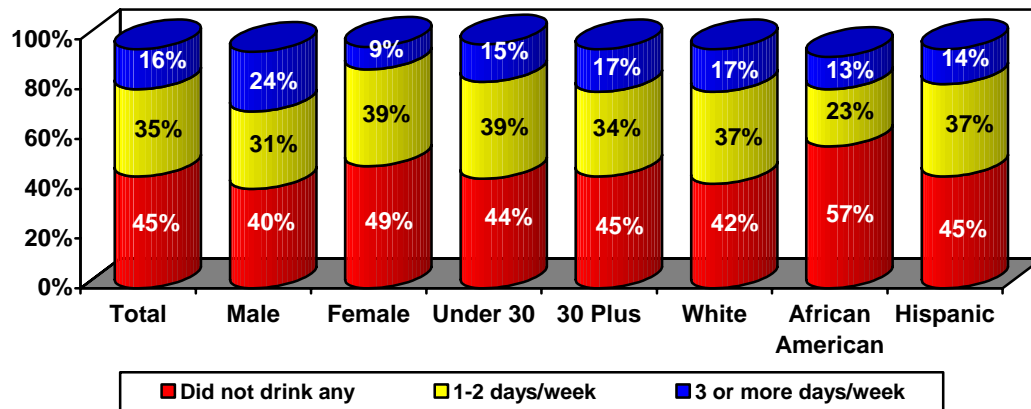
*(Source: 1999 Lucas County Community Health Assessment Report)*



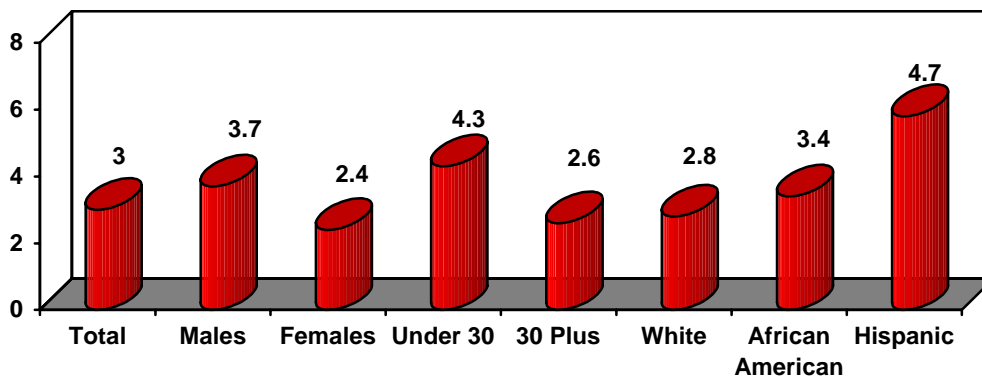
## Alcohol Consumption

The following graphs show the percentage of Lucas County adult respondents consuming alcohol and the amount consumed on average. They show the number of residents in each segment giving each answer (i.e., the first graph shows that 45% of all adults surveyed do not drink alcohol and 35% drink an average of 1-2 days a week, 40% of males do not drink, 49% of females do not drink, etc.).

**Average Number of Days Drinking Alcohol In Past Month**

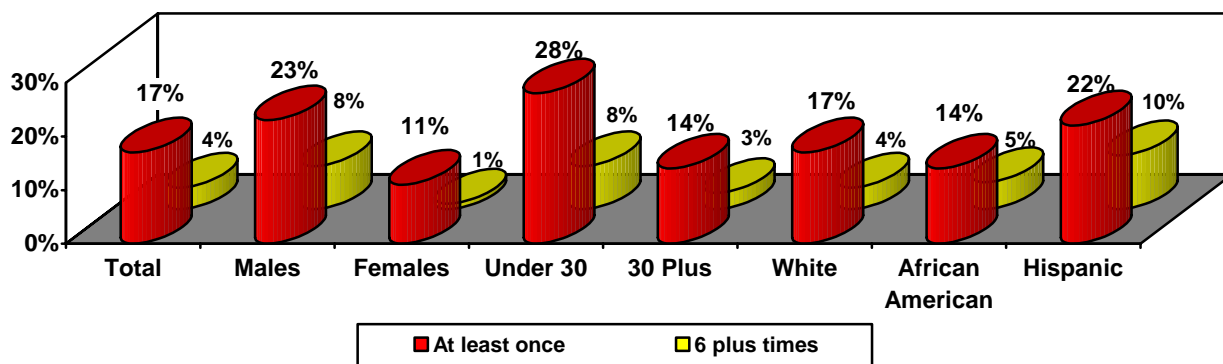


**Average Number of Drinks Consumed Per Occasion\***



\*Based on those who have consumed alcohol in past month.

**Consumed Five or More Drinks on an Occasion in Past Month\***



\*Based on all Lucas County Adults.

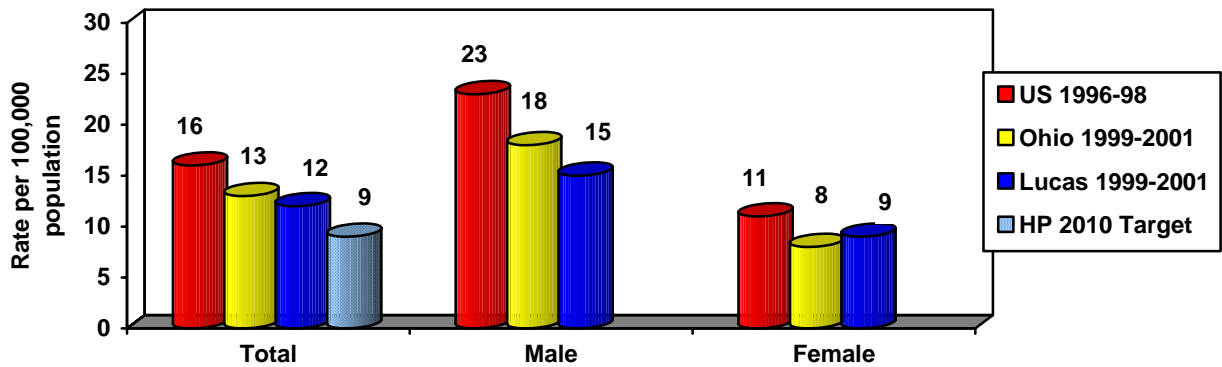
Question asked: Considering all types of alcoholic beverages, how many times during the past month did you have five or more drinks on an occasion?

## Alcohol Consumption

The following graphs show Lucas County and Ohio age-adjusted rates per 100,000 population for motor vehicle accidents with comparison to the Healthy People 2010 goal. The graphs show that:

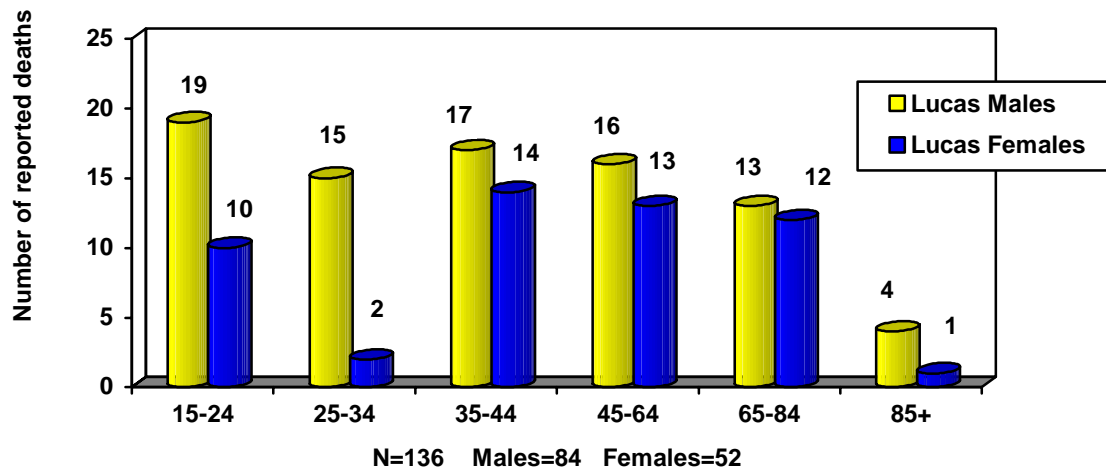
- ◆ The Lucas County motor vehicle age-adjusted mortality rate of 12 deaths per 100,000 population is lower than the state and nation, but remains above the Healthy People 2010 target goal of 9.
- ◆ The county motor vehicle age-adjusted mortality rate for males is 1.7 times the female rate.
- ◆ 62% of the motor vehicle accident deaths in 1999-2001 were males.
- ◆ 40% of the male motor vehicle accident deaths in 1999-2001 occurred to those ages 15-34.

**Healthy People 2010 Objectives and Age-Adjusted Mortality Rates for Motor Vehicle Accidents**



(Source: ODH Information Warehouse and CDC Wonder)  
Rates adjusted to the appropriate 2000 population standard

**Lucas County Number of Motor Vehicle Accidents Deaths By Age and Gender, 1999 - 2001**



(Source: ODH Information Warehouse)

## Lucas County Crash Statistics

	<b>Toledo 2002</b>	<b>Toledo 2001</b>	<b>Lucas 2002</b>	<b>Lucas 2001</b>	<b>Ohio 2002</b>	<b>Ohio 2001</b>
Accidents/1,000 people	42.57	48.86	40.18	44.59	34.0	34.09
Alcohol related accidents/1,000 people	1.13	1.22	1.20	1.27	1.54	1.48
Total crashes	13,352	15,322	18,283	20,291	386,076	387,075
Alcohol related total crashes	355	383	547	579	17,461	16,794
Fatal crashes	21	21	39	35	1,284	1,258
Alcohol related fatal crashes	4	4	8	7	341	342
Injury crashes	3,330	3,770	4,736	5,171	95,374	94,971
Alcohol related injury crashes	164	178	246	274	7,754	7,702
Property Damage Only (PDO)	9,419	10,746	12,862	14,206	278,378	278,083
Alcohol related Property Damage Only (PDO)	178	184	281	280	8,973	8,367
Deaths	21	26	42	40	1,417	1,379
Alcohol related deaths	4	5	9	8	379	375
Injuries	5,044	5,473	7,146	7,582	143,258	138,847
Alcohol related injuries	271	287	397	432	11,479	11,131

*(Source: Ohio Department of Public Safety)*

## Lucas County City Crash Statistics

	Maumee 2002	Maumee 2001	Oregon 2002	Oregon 2001	Sylvania 2002	Sylvania 2001
Accidents/1,000 people	49.28	46.93	33.63	30.38	23.35	24.48
Alcohol related accidents/1,000 people	1.90	1.44	1.19	1.34	.96	0.80
Total crashes	751	715	651	588	436	457
Alcohol related total crashes	29	22	23	26	18	15
Fatal crashes	1	2	0	0	0	0
Alcohol related fatal crashes	0	1	0	0	0	0
Injury crashes	209	186	191	182	121	123
Alcohol related injury crashes	9	10	9	14	6	7
Property Damage Only (PDO)	528	516	447	388	310	325
Alcohol related Property Damage Only (PDO)	20	11	13	12	12	8
Deaths	1	2	0	0	0	0
Alcohol related deaths	0	1	0	0	0	0
Injuries	291	264	289	280	167	166
Alcohol related injuries	20	13	9	23	9	10

*(Source: Ohio Department of Public Safety)*

# Marijuana and Other Drug Use

## Key Findings

*The 2003 assessment has identified that in the past four months, 8% of Lucas County adults reported they have used medications that were not prescribed for them or took a larger dose than prescribed in order to feel good or high. In addition, 16% of Lucas County adults have used an illegal drug such as marijuana or a legal drug inappropriately like tranquilizers or codeine in the past four months. Nearly 9% of adults reported using marijuana in the past four months, increasing to 24% among those under 30. Marijuana can be harmful for numerous reasons and its lasting effects can be found in cancer, lung infections, long-term memory loss and decreased function of the immune system. Some longitudinal studies have found that very few people experiment with other drugs without using marijuana initially. (Source: National Clearinghouse of Alcohol and Drug Information)*

## Adult Drug Use

- ◆ In the past four months, almost one in ten (8%) Lucas County adults surveyed have used medication that was not prescribed for them or took more than prescribed to feel good high, active, or alert. Those most likely to report these behaviors are males (12% compared to 5% females), those with a household income less than \$25,000 (11% compared to 7% higher income households) and adults under age 30 (10% compared to 7% of those 30 and over).
- ◆ 16% of adult respondents have used an illegal drug or inappropriately used a legal drug in the past four months. Marijuana (9%) is most commonly used, followed by tranquilizers (3%), and codeine. Illegal drug use or inappropriate use of a legal drug is most common among the following groups:
  - 26% of adult African Americans (compared to 14% of Whites and 22% of Hispanics)
  - 24% of adults ages 19-29 (compared to 13% of those 30 and older)
  - 24% of adults with an annual household income less than \$25,000 (compared to 13% over \$25,000)
  - 23% of adult males (compared to 11% of females)
- ◆ According to this survey, African Americans are using Marijuana at a higher rate than Whites (16% to 7%) but are not necessarily more frequent users.
- ◆ Almost half (45%) of adults who use illegal or prescription drugs taken differently than prescribed, report the frequency of their use at once a week or more in the past four months.
- ◆ 15% of drug users reported having problems meeting obligations at work or home, placed themselves in dangerous situations or had legal problems due to their drug use.

## Prescription Drug Abuse Facts From the 2001 National Household Survey on Drug Abuse

- ◆ 16% of persons aged 12 or older (18% of those 12 to 25) had used prescription-type drugs for a non-medical purpose at least once in their lifetime.
- ◆ Of the estimated 11.1 million people in the U.S. who reported using prescription drugs non-medically in the past year, nearly half (5.4 million) were ages 12-25.
- ◆ Youth users in the past year are more likely to be:
  - Females (9% versus 7% of males)
  - Live in a non-metropolitan or small metropolitan area (9% versus 7% in a large metropolitan area)
- ◆ Adult users in the past year are more likely to be:
  - Males (14% versus 10% of females)
  - Young adults aged 18-25 (12%)
- ◆ Pain relievers were the prescription drugs most often used nonmedically by youths and young adults in the past year.

*(Source: SAMHSA 2001 National Household Survey on Drug Abuse)*

## Commonly Abused Prescription Drugs

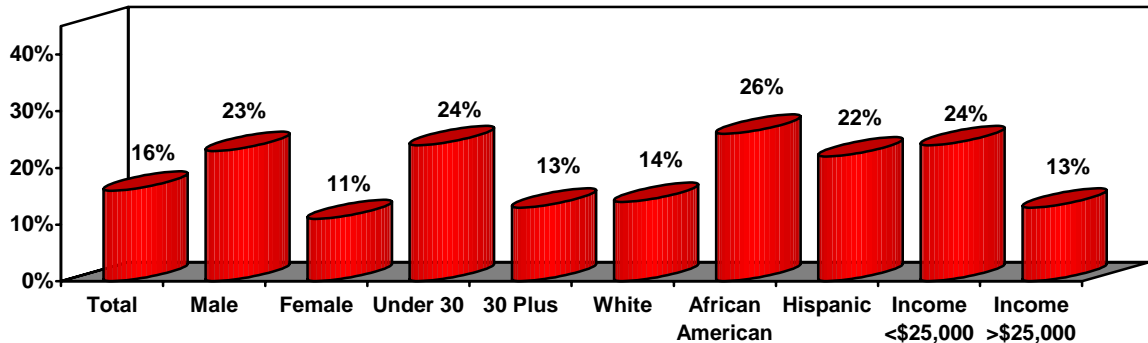
- ◆ **Opioids** –most often prescribed to relieve pain. Examples include: Codeine, Percocet, Darvon (Propoxyphene), Duragesic (Fentanyl), Dilaudid (Hydromorphone), Demerol (Meperidine), OxyContin (Oxycodone), Vicodin (hydrocodone)
- ◆ **Central Nervous System (CNS) Depressants**- may be used to treat anxiety and sleep disorders. Examples include: Mebaral (mephobarbital), Nembutal (pentobarbital sodium), Valium (diazepam), Librium (chlordiazepoxide HCL), Xanax (alprazolam), ProSom (estazolam)
- ◆ **Stimulants**-prescribed to treat narcolepsy, attention-deficit hyperactivity disorder (ADHD), asthma and obesity. Examples include: Dexedrine (dextroamphetamine), Ritalin (methylphenidate)

*(Source: National Institute On Drug Abuse, [www.nida.nih.gov](http://www.nida.nih.gov))*

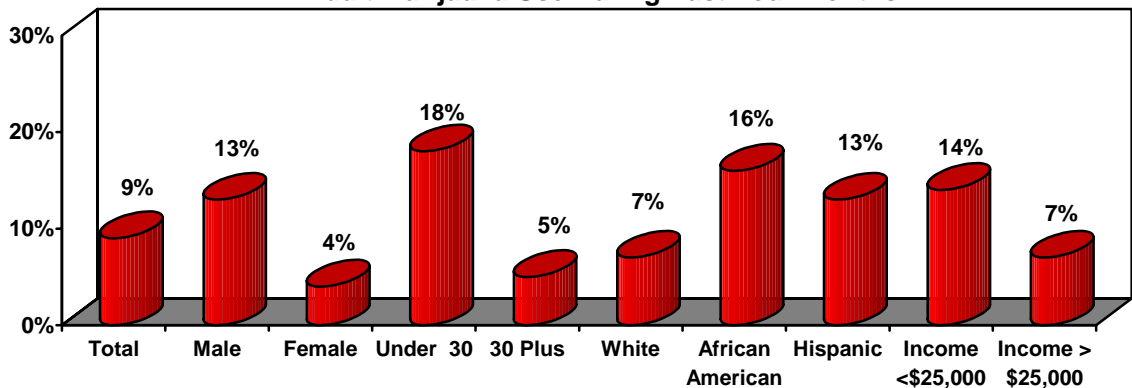
## Marijuana and Other Drug Use

The following graphs show the percentage of Lucas County surveyed adults using drugs and marijuana. They show the number of residents in each segment giving each answer (i.e., the first graph shows that 16% of all adult respondents are current drug users, 23% of male adults are current users, 11% of female adults are current user, etc.)

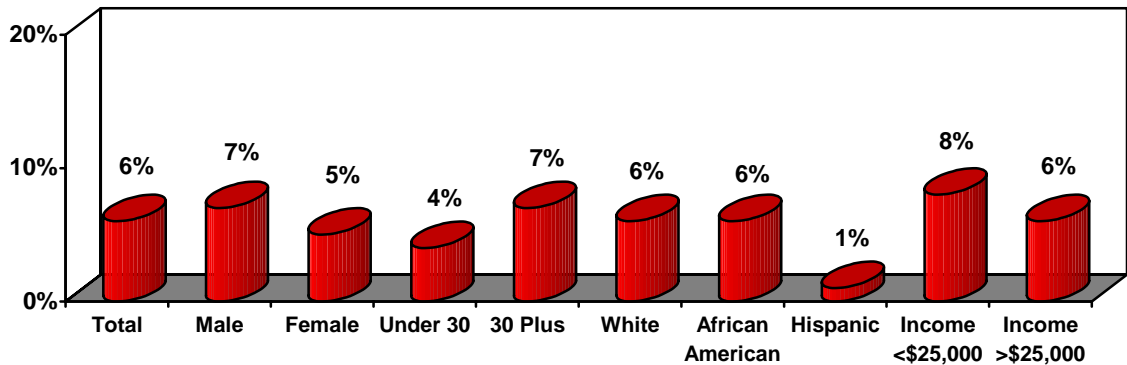
**Adult Drug Use During Past Four Months**



**Adult Marijuana Use During Past Four Months**



**Adult Misuse of Prescription Drugs\***



*\*Using prescription drugs not prescribed for you or misusing a prescription drug prescribed for you.*

# Women's Health

## Key Findings

*Cardiovascular diseases and cancers are the leading causes of death for both men and women in Ohio, the nation, and Lucas County.*

*Prevention and early detection saves lives. In this survey, 77% of Lucas County women over the age of 40 have had a mammogram in the past two years. In the past year, 56% of all Lucas County women have had a breast exam performed by a health care practitioner and 54% have had a Pap smear. Of those women*

*surveyed, Hispanic women, those without health coverage, and women with lower incomes most often go without these screening services or wait longer before having them. Thirty percent of Lucas County women without health coverage report not having a usual source for care for female health concerns as compared to 6% of those with health coverage.*

## Lucas County Leading Causes of Female Deaths 1993-2001

1. Heart Diseases (7,832 deaths) (Averaging 879/year)
2. Cancers (4,591) (Averaging 510/year)
3. Stroke (1,716) (Averaging 190/year)
4. Chronic Lung Diseases (1,119) (Averaging 124/year)
5. Diabetes (695) (Averaging 77/year)

*(Source: ODH Information Warehouse)*

## Women's Health Exams

- ◆ According to the 2003 Lucas County assessment, 63% (64% in 1999) of Lucas County women have had a mammogram at some time (trended with 63% of U.S. and 66% of Ohio women, 2002 BRFSS) and 33% (35% in 1999) have had one within the past year. In the past two years, 77% of surveyed Lucas County women over the age of 40 have had a mammogram.
- ◆ This survey data identifies that 88% (91% in 1999) of Lucas County women have had a clinical breast exam at some time (trended with 91% of U.S. and 90% of Ohio women, 2002 BRFSS) and just over half (56%) have had one within the past year. In the 1999 Lucas County assessment, this figure was reported at 55%.
- ◆ In 2003, 91% (97% in 1999) of Lucas County women reported they have had a Pap smear (compared to 95% of U.S. and Ohio women, 2002 BRFSS) and 54% (54% in 1999) report having had an exam in the past year.
- ◆ Just under one in ten (9%) Lucas County women surveyed report not having a usual source for female health care and concerns, which is nearly double the 1999 figure of 5%. Just under one-third (30%) of those women without health coverage in 2003 report not having a usual source for female health concerns.

## Family Planning

- ◆ The health assessment has identified that during the past five years, one in five (18%) Lucas County women report having been pregnant, increasing to 44% among women under age 30.
- ◆ Of those surveyed, 17% of married and 26% of unmarried women who were pregnant in the past five years said they didn't want to be pregnant at any time. In contrast, 19% of that same group of unmarried women who were pregnant in the past five years stated that they had wanted to be the pregnant at that time or sooner.
- ◆ Of those who were pregnant in the past five years, 16% smoked cigarettes during their pregnancies and 2% used other drugs. Those women most likely to smoke during their pregnancies include: 34% of women with lower incomes, 34% of African American adult females and 22% of adult females aged 35-44.

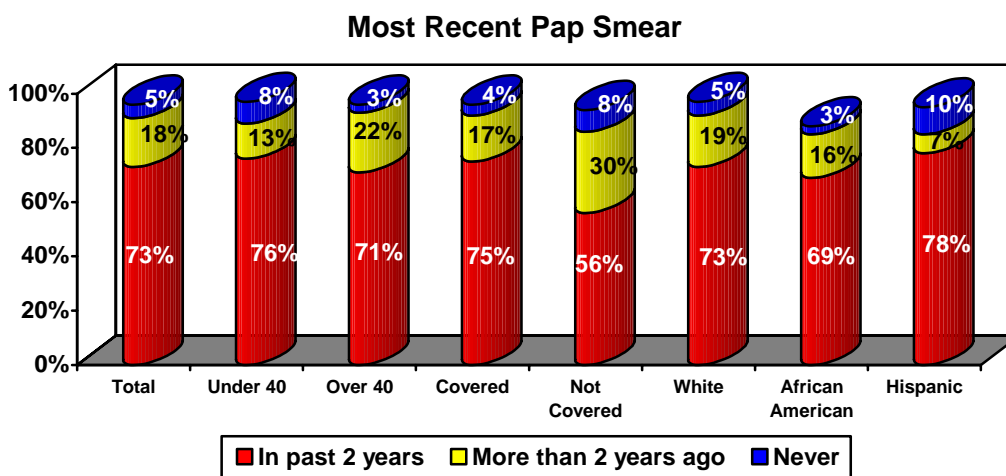
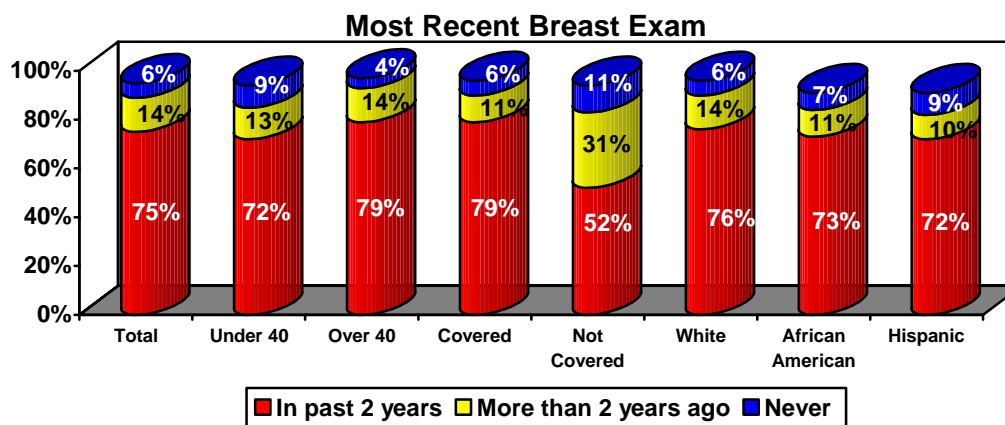
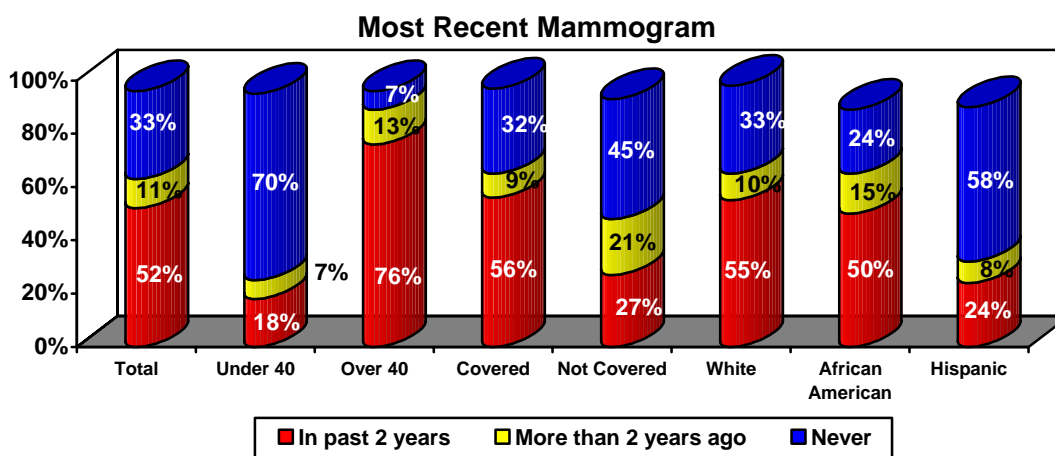
## Differences in Cardiovascular Disease Factors for Women and Men

- ◆ Women typically develop cardiovascular diseases (CVD) up to 10 years later than men, yet after menopause, the risk steadily increases.
- ◆ Women are more likely than men to have fatal cardiac events, poorer prognoses after a heart attack and more complications after coronary procedures.
- ◆ 63% of women who die of coronary heart disease never experienced any prior symptoms.
- ◆ Type II diabetes is a greater risk factor for CVD in women than in men.
- ◆ In the absence of other risk factors, elevated levels of triglycerides increase the risk for CVD in women aged 50 and over, but not in men.
- ◆ Smoking lowers the age of a first heart attack and raises the relative risk of heart attack more for women than for men.
- ◆ Pre-menopausal women with risk factors such as smoking and diabetes are more likely to have a heart attack during or just after their monthly periods when their estrogen levels are lowest.
- ◆ Approximately 40,000 more women than men die from strokes each year in the U.S.

*Source: Society for Women's Health Research and the Cardiovascular Health Fact Sheet, Hoffman-LaRoche Inc.*

## Women's Health

The following graphs show the number of surveyed Lucas County women who have had mammograms, breast exams and Pap smears. They show the number of women in each segment who have had each screening (i.e., the first graph shows that 52% of all women have had a mammogram in the past two years and 11% have had one more than two years ago, 56% of women with health coverage have had a mammogram in the past two years, etc.).



*Percentages in graphs above do not equal 100% because some women did not know the answer.*

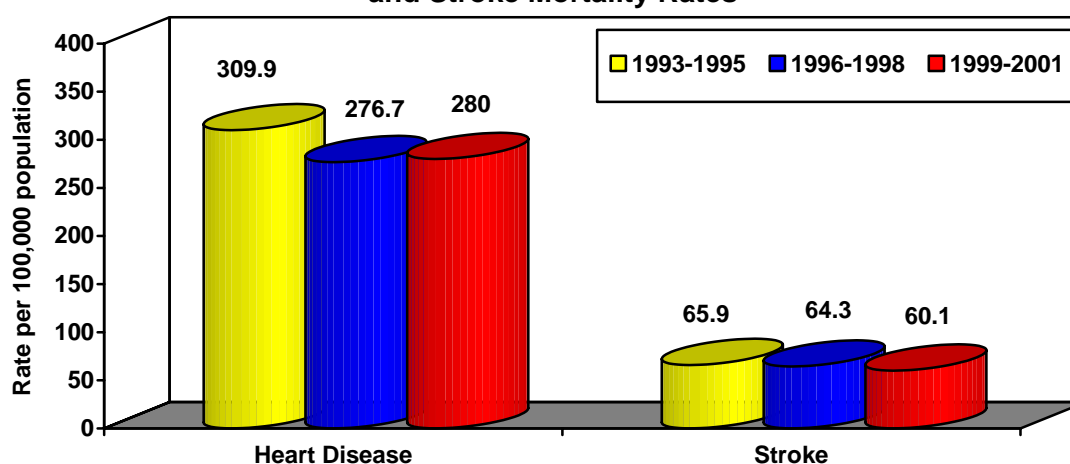


## Women's Health

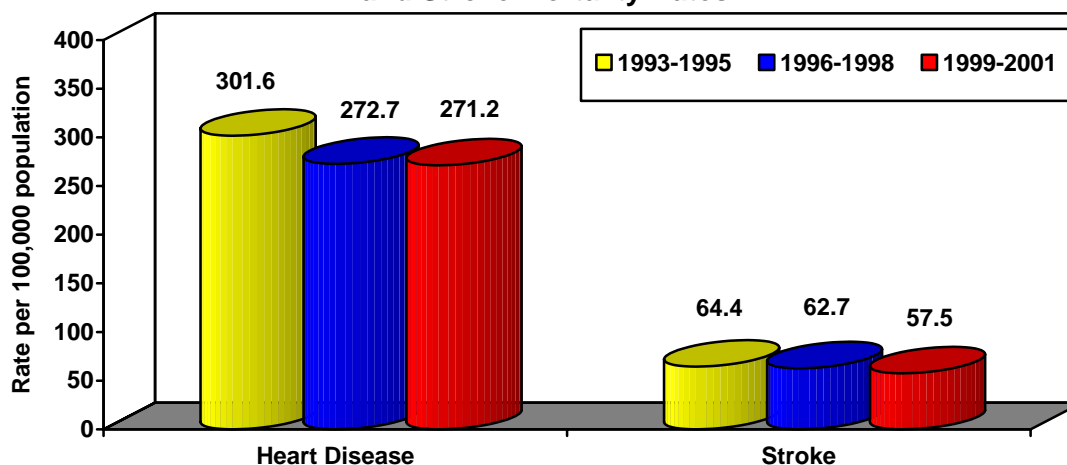
The following graphs show the Lucas County age-adjusted mortality rates per 100,000 population for women's health with comparisons to Healthy People 2010 objectives when available. The graphs show that:

- ◆ From 1993-2001, the overall female age-adjusted mortality rate for heart disease deaths has declined while the rate for African American females has increased by nearly 26% (Table 1 and Table 3).
- ◆ The 1999-2001 Lucas County female age-adjusted heart disease mortality rate of 280 deaths per 100,000 population is higher than the Healthy People 2010 goal of 160 per 100,000 (Table 1). *(Please note that the HP rate is for both genders combined).*
- ◆ In 1999-2001, the age-adjusted heart disease mortality rate for African American women is 25% higher than the rate for White females (Table 5).
- ◆ The 1999-2001 Lucas County female age-adjusted stroke mortality rate of 60 deaths per 100,000 population exceeds the HP 2010 target goal of 48 (Table 1).
- ◆ In 1999-2001, the age-adjusted stroke mortality rate for African American women is 30% higher than the rate for White females (Table 6).
- ◆ In 1999-2001, Asian/Pacific Islander and Hispanic/Latino females in Lucas County have the lowest age-adjusted heart disease mortality rates (Table 5).

**Table 1 - Lucas County Female Age-Adjusted Heart Disease and Stroke Mortality Rates**



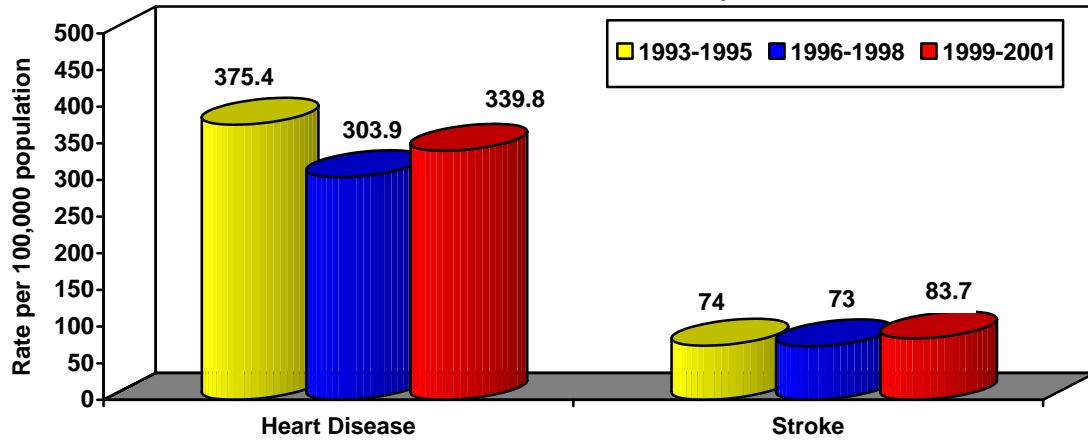
**Table 2 - Lucas County White Female Age-Adjusted Heart Disease and Stroke Mortality Rates**



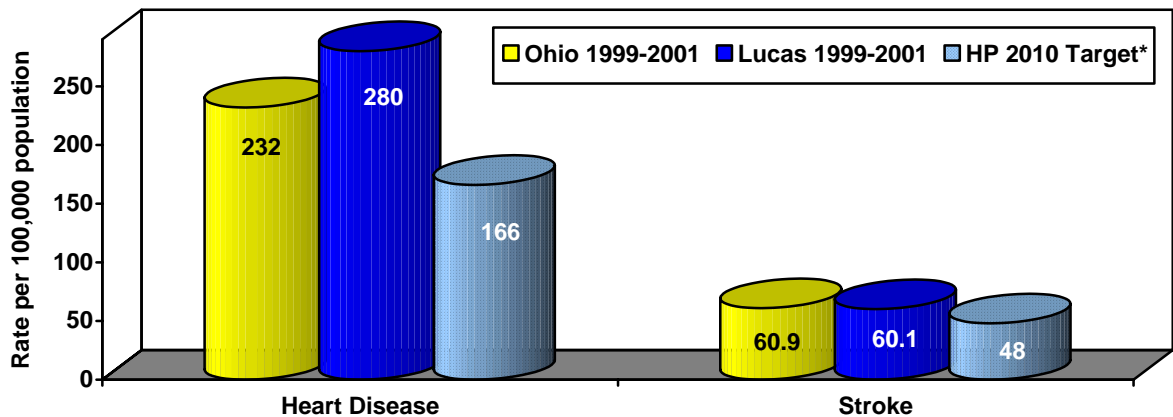
(Source for graphs: ODH Information Warehouse)

# Women's Health

**Table 3 - Lucas County African American Female Age-Adjusted Heart Disease and Stroke Mortality Rates**



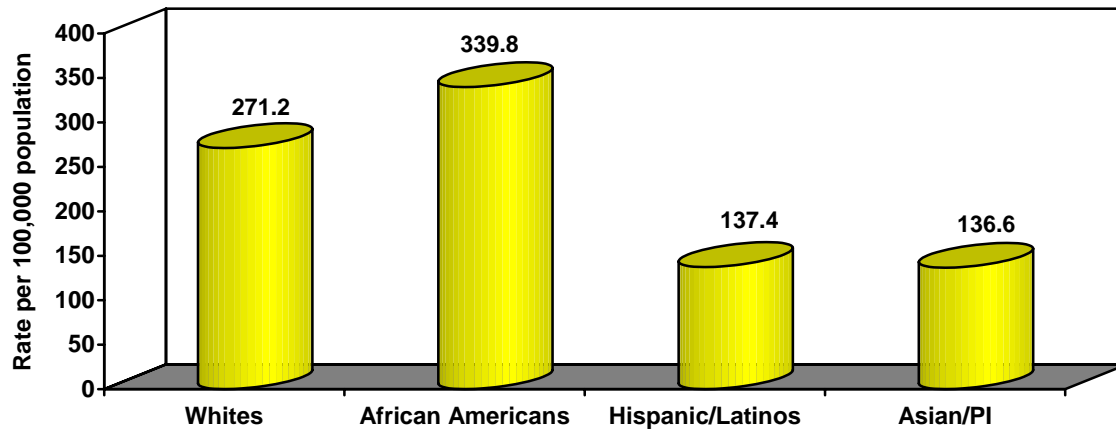
**Table 4 - Lucas County 1999-2001 Female Age-Adjusted Heart Disease and Stroke Mortality Rates With Comparisons**



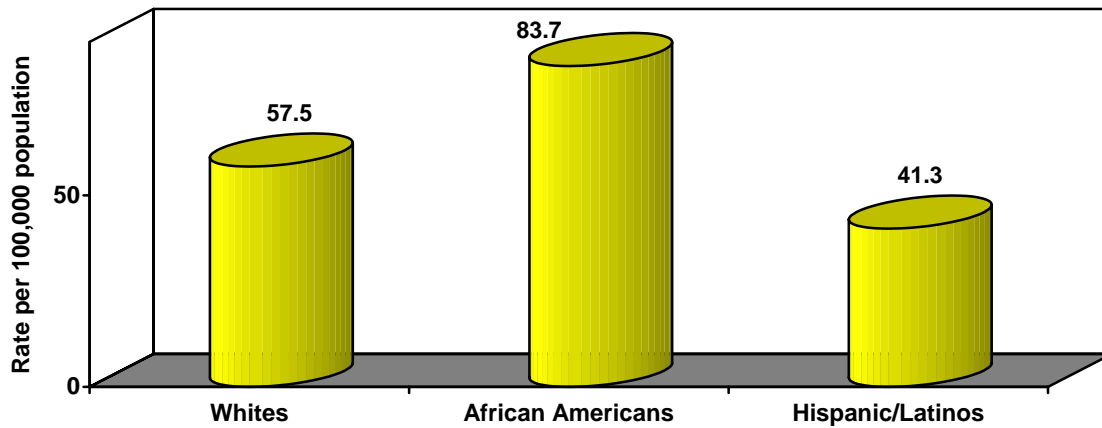
*\*Please note that the Healthy People 2010 target goals are not gender specific.  
(Source: ODH Information Warehouse and Healthy People 2010)*

## Women's Health

**Table 5 - Lucas County Female Age-Adjusted Heart Disease Mortality Rates By Race/Ethnicity 1999-2001**



**Table 6 - Lucas County Female Age-Adjusted Stroke Mortality Rates By Race/Ethnicity 1999-2001**

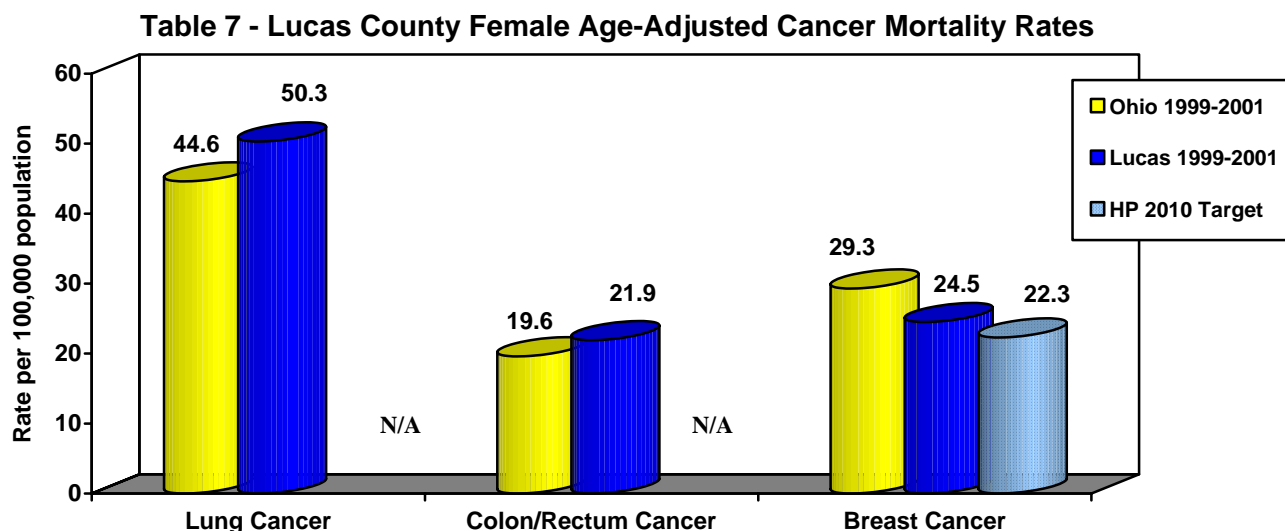


*Please note that the age-adjusted stroke mortality rate for Hispanic/Latino females was calculated with less than five deaths.  
(Source for graphs: ODH Information Warehouse)*

## Women's Health

The following graphs show the Lucas County age-adjusted mortality rates per 100,000 population for women's health with comparison to Healthy People 2010 objectives when available. The graphs show that:

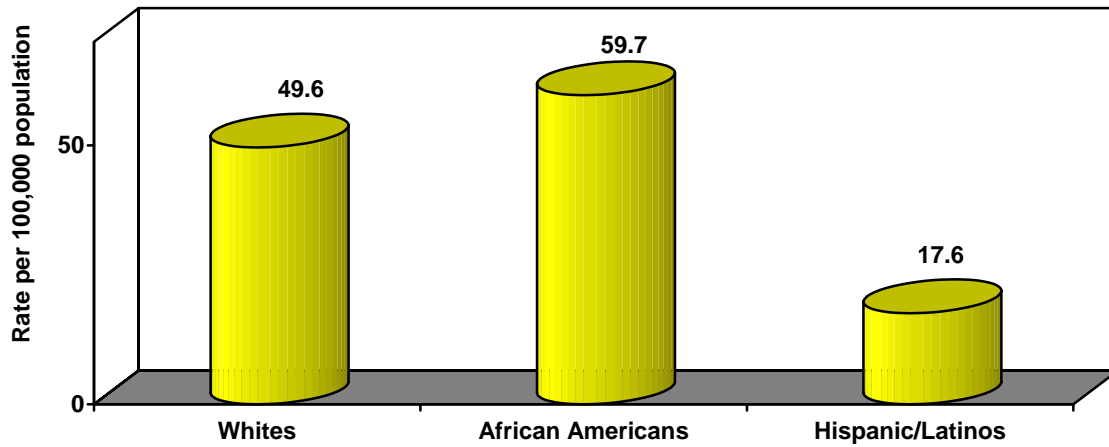
- ◆ From 1999-2001, the Lucas County age-adjusted mortality rate of 50.3 for female lung cancer (see Table 8) is just over half the male rate of 91.1 deaths per 100,000 population.
- ◆ Lung cancer took the lives of 406 women and 510 men in Lucas County from 1999-2001. (ODH Information Warehouse)
- ◆ From 1999-2001, Hispanic females have an age-adjusted lung cancer mortality rate that is much lower than the rates for White and African American females and the African American female rate is 20% higher than the White female figure (Table 8).
- ◆ For 1999-2001, the Lucas County age-adjusted breast cancer mortality rate of 24.3 deaths per 100,000 population is higher than the Healthy People 2010 target goal of 22.3 (Table 9).
- ◆ For 1999-2001, the White female age-adjusted ovarian cancer mortality rate is twice the rate for African American females (Table 11).
- ◆ The Lucas County age-adjusted cervical cancer mortality rate for 1999-2001 is below the Healthy People 2010 target goal (Table 10).
- ◆ In 1999-2001, the Lucas County age-adjusted uterine cancer mortality rate for White females is approximately 48% higher than the African American figure (Table 12).



(Source: ODH Information Warehouse)

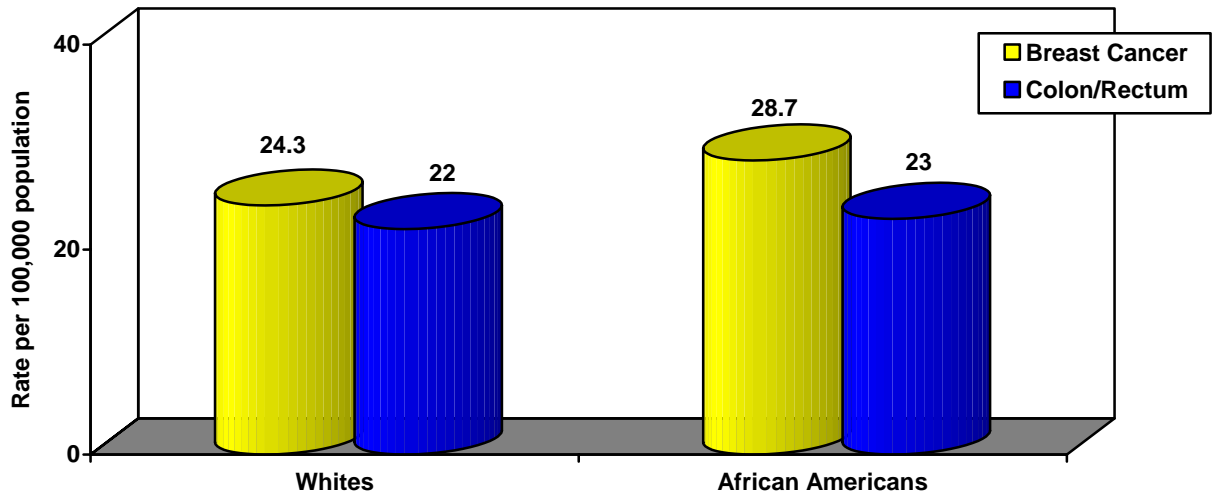
## Women's Health

**Table 8 - Lucas County Female Age-Adjusted Lung Cancer Mortality Rates By Race/Ethnicity 1999-2001**



*Please note that the Hispanic/Latino rate was calculated with less than five deaths.*

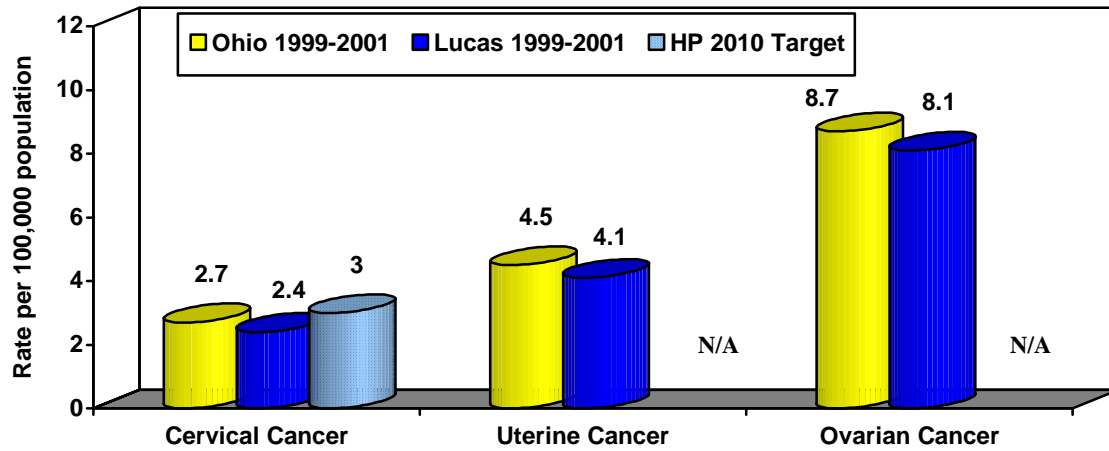
**Table 9 - Lucas County Female Age-Adjusted Breast and Colon/Rectum Cancer Mortality Rates By Race/Ethnicity**



*(Source: ODH Information Warehouse)*

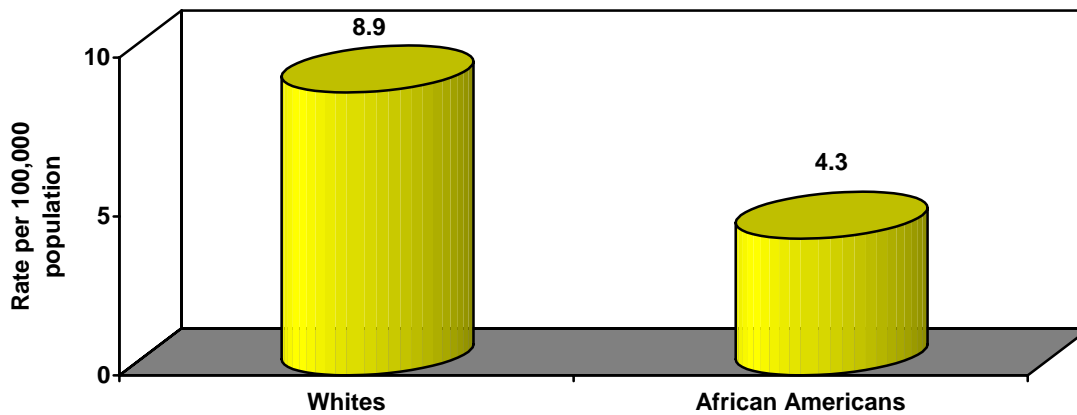
## Women's Health

**Table 10 - Lucas County Female Age-Adjusted Cancer Mortality Rates**



*(Source: ODH Information Warehouse and Healthy People 2010)*

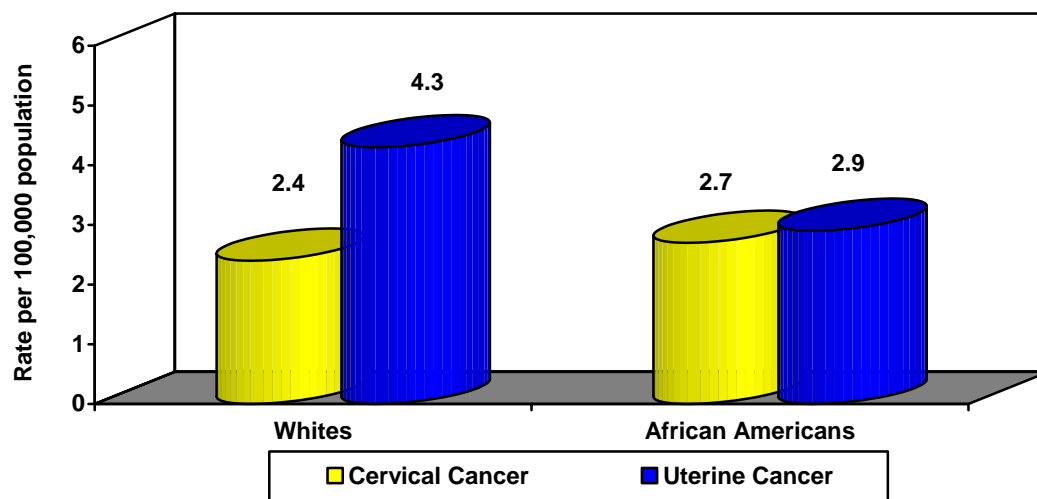
**Table 11 - Lucas County Female Age-Adjusted Ovarian Cancer Mortality Rates By Race/Ethnicity, 1999 - 2001**



*Please note that the rate for African Americans was calculated with less than five deaths.  
(Source: ODH Information Warehouse)*

## Women's Health

**Table 12 - Lucas County Female Age-Adjusted Cervical and Uterine Cancer Mortality Rates By Race/Ethnicity, 1999 - 2001**



*Please note that the rates for African Americans were calculated with less than five deaths.  
(Source: ODH Information Warehouse)*

# Hispanic Health

## Key Findings

*Based on 2000 U.S. Census figures, approximately 20,670 Hispanic/ Latinos live in Lucas County (4.5%). Health information for this population is often difficult to obtain. The Ohio Department of Health, Information Warehouse, reports that 245 of the 514 (54%) Hispanic/Latino deaths from 1993-2001 were from cardiovascular diseases and cancer.*

## Leading Causes of Death 1993-2001

### Lucas Hispanics Total Deaths 514

1. Heart Diseases (142)
2. Cancers (103)
3. Accidents (44)
4. Stroke (34)
5. Diabetes (31)

*(Source: ODH Information Warehouse)*

### Lucas Non-Hispanics Total Deaths 40,030

1. Heart Diseases (14,261)
2. Cancers (9,277)
3. Stroke (2,704)
4. Lung Diseases (2,190)
5. Diabetes (1,163)

## General Health and Health Care Assessment Findings

**\*Please note that due to the small number of Hispanic adults surveyed (n = 64), the results reported below should be used with caution.**

- ◆ In this survey, when compared to Non-Hispanic Whites, Lucas County Hispanic adults are just as likely to rate their health status as fair or poor (11% Hispanic compared to 13% Non-Hispanic White), but they are not quite as satisfied with their health care (17% of Hispanics rate their health care fair or poor compared to 14% Non-Hispanic Whites).
- ◆ Just under one out of three Hispanic adults surveyed (30%) does not have health care coverage.
- ◆ Hispanic adult respondents are less likely to have seen a dentist in the past year (57% compared to 67% of Non-Hispanic Whites).
- ◆ This survey data identifies that 49% of Hispanics have had their blood cholesterol checked in the past five years, compared to 74% of Non-Hispanic Whites.
- ◆ 13% have used marijuana in the past 30 days, compared to 7% for Non-Hispanic Whites.
- ◆ Hispanic respondents are just as likely as Non-Hispanic White respondents to:
  - Have been diagnosed with diabetes (8% compared to 7% of Non-Hispanic Whites).
  - Have consumed alcohol in the past 30 days (51% compared to 55% of Non-Hispanic Whites).
  - Have had multiple sexual partners in the past year (10% compared to 10%)
- ◆ Hispanic respondents are more likely to be current tobacco users (32% compared to 26% of Non-Hispanic Whites).
- ◆ Surveyed Hispanics are more likely to be classified as obese or overweight according to BMI (68% obese or overweight compared to 60% of Non-Hispanic Whites).

## Hispanics With Diabetes...

- ◆ Often face economic barriers to treatment.
- ◆ May be reluctant to place their own medical needs over the needs of family members.
- ◆ May express a distrust of insulin therapy.
- ◆ May prefer more familiar traditional remedies.
- ◆ May display a fatalistic acceptance of the course of the disease.

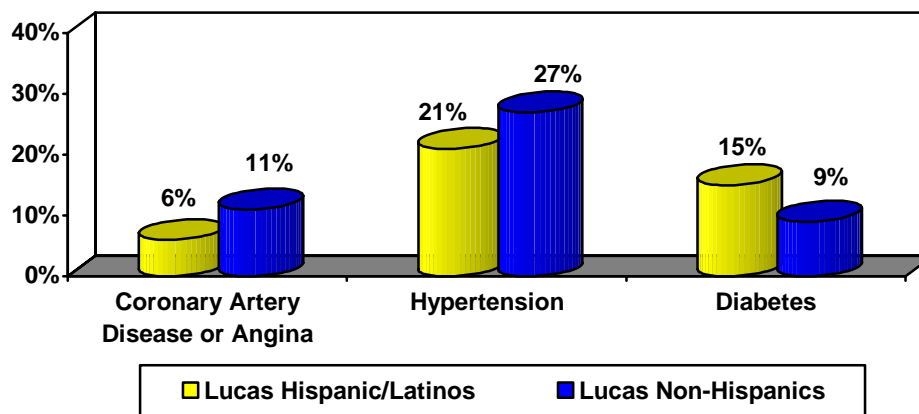
*(Source: Agency for Healthcare Research and Quality (AHRQ))*



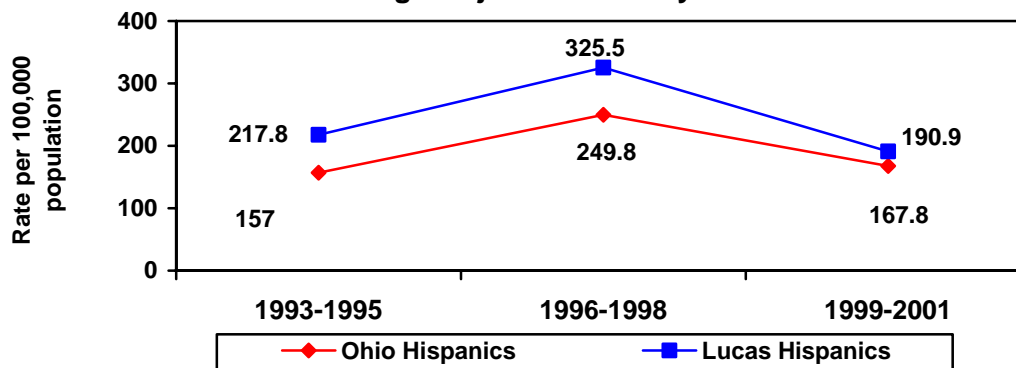
# Hispanic Health

- ◆ For the reporting years of 1999-2001, the Lucas County age-adjusted heart disease mortality rate for Hispanic/Latinos was approximately 43% lower than the Non-Hispanic rate (Table 3).
- ◆ The 1999-2001 Lucas County age-adjusted cancer mortality rate for Hispanic/Latinos was approximately 33% lower than the rate for Non-Hispanics (Table 6).
- ◆ In 1999-2001, the age-adjusted accident (unintentional injuries) mortality rate for Hispanic/Latinos was 45% higher than the rate for Non-Hispanics (Table 9).
- ◆ The 1999-2001 age-adjusted rate of Hispanic/Latino deaths from stroke in Lucas County was approximately 25% lower than the Non-Hispanic rate (Table 12).
- ◆ In 1999-2001, the Lucas County age-adjusted diabetes mortality rate for Hispanic/Latinos was nearly twice the rate for Non-Hispanics (Table 15).

**Table 1 - Cardiovascular & Diabetes Disease Prevalence**



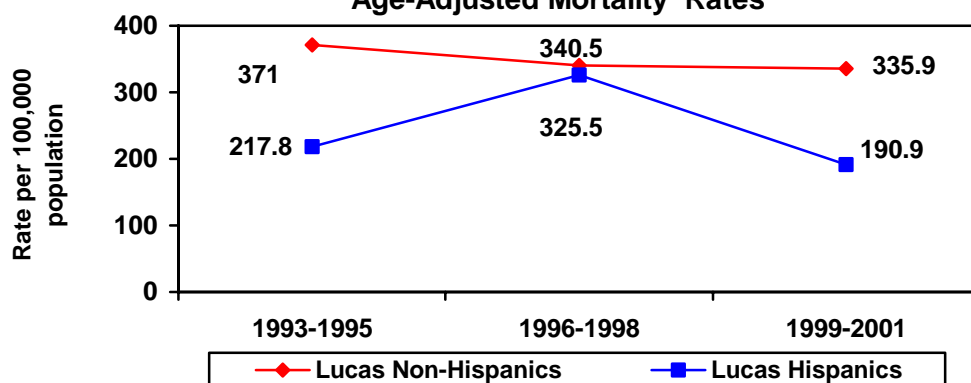
**Table 2 - Lucas County and Ohio Hispanic/Latino Heart Disease Age-Adjusted Mortality Rates**



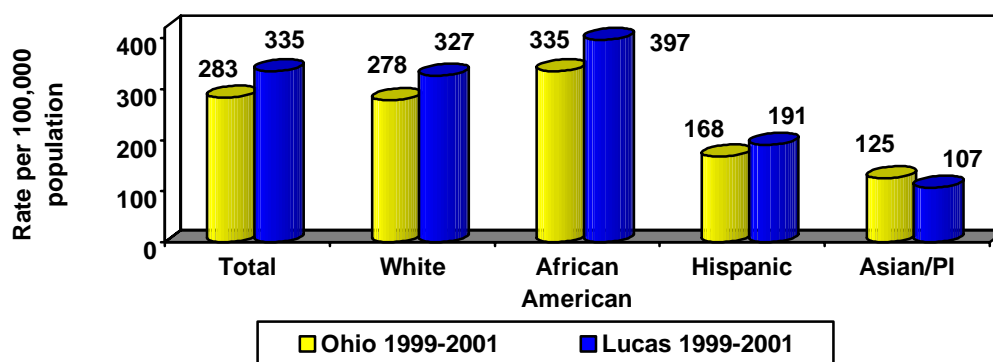
(Source: OHD Information Warehouse)

# Hispanic Health

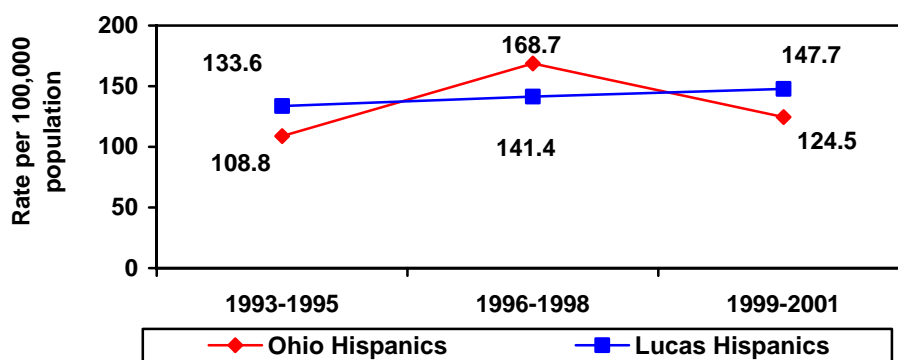
**Table 3 - Lucas County Hispanic/Latino Heart Disease Age-Adjusted Mortality Rates**



**Table 4 - Age-Adjusted Heart Disease Mortality Rates by Race/Ethnicity**



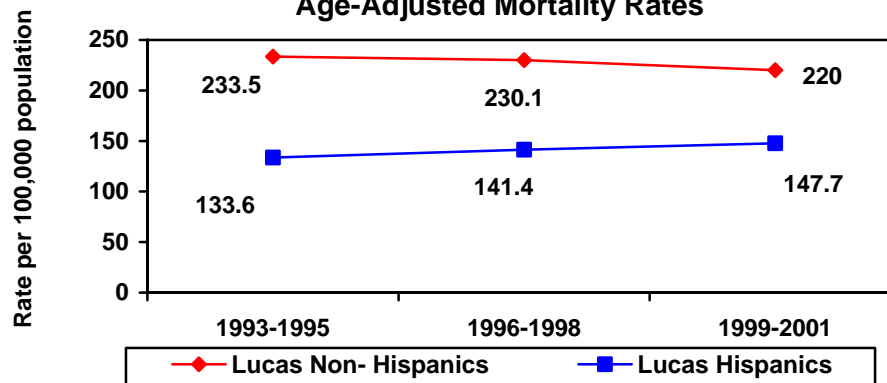
**Table 5 - Lucas County and Ohio Hispanic/Latino Cancer Age-Adjusted Mortality Rates**



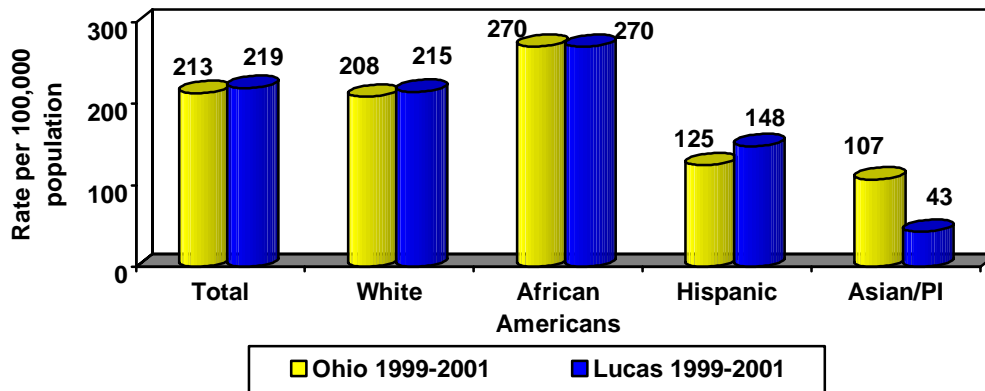
(Source: ODH Information Warehouse)

# Hispanic Health

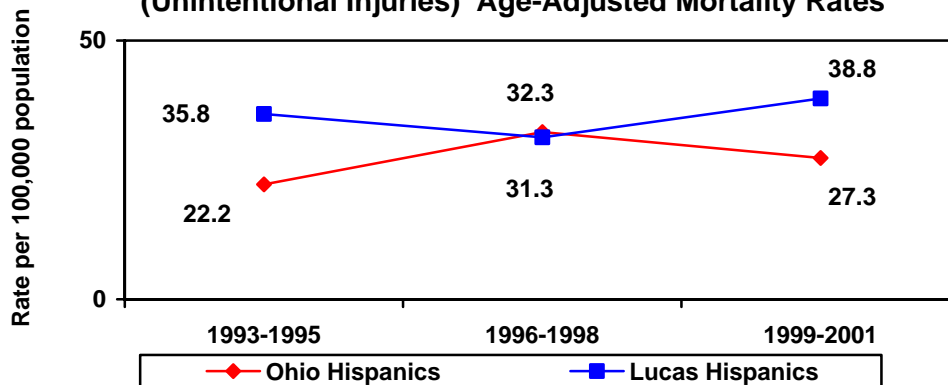
**Table 6 - Lucas County Hispanic/Latino Cancer Age-Adjusted Mortality Rates**



**Table 7 - Age-Adjusted Cancer Mortality Rates by Race/Ethnicity**



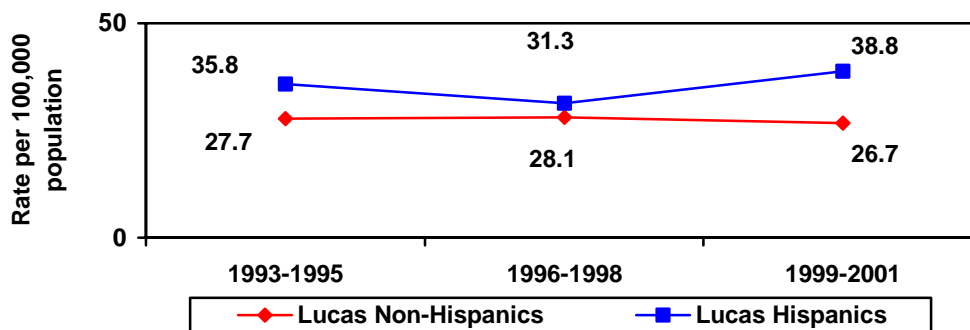
**Table 8 - Lucas County and Ohio Hispanic/Latino Accident (Unintentional Injuries) Age-Adjusted Mortality Rates**



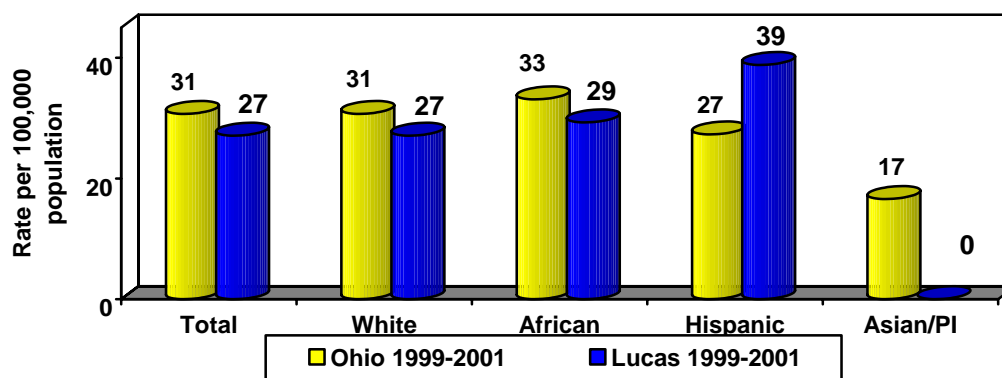
(Source: ODH Information Warehouse)

# Hispanic Health

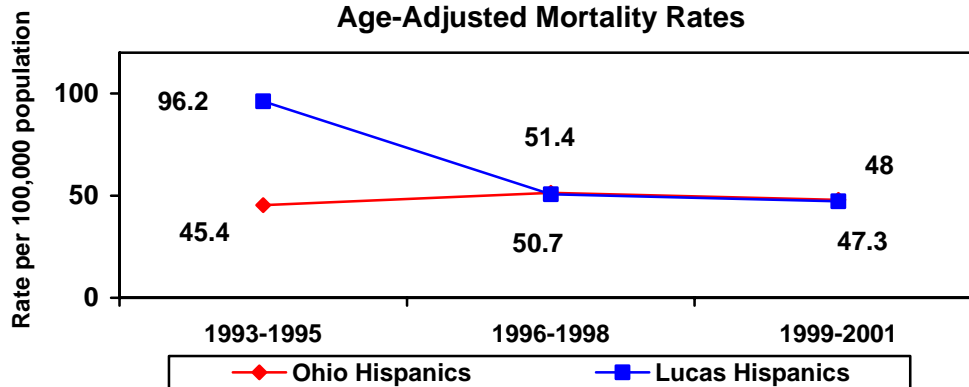
**Table 9 - Lucas County Hispanic/Latino Accident (Unintentional Injuries) Age-Adjusted Mortality Rates**



**Table 10 - Age-Adjusted Accident Mortality Rates by Race/Ethnicity**



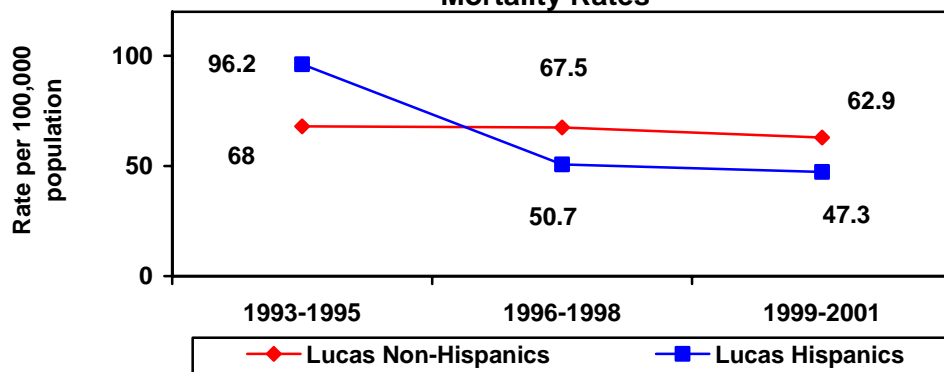
**Table 11 - Lucas County and Ohio Hispanic/Latino Stroke Age-Adjusted Mortality Rates**



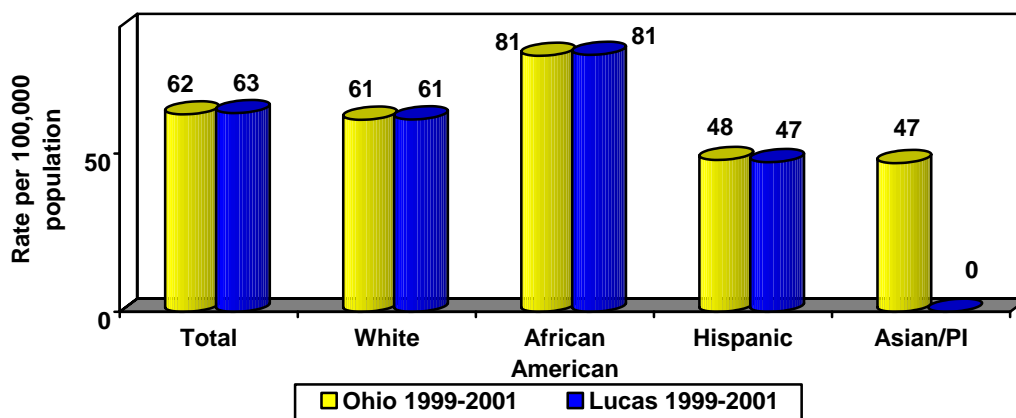
(Source: ODH Information Warehouse)

# Hispanic Health

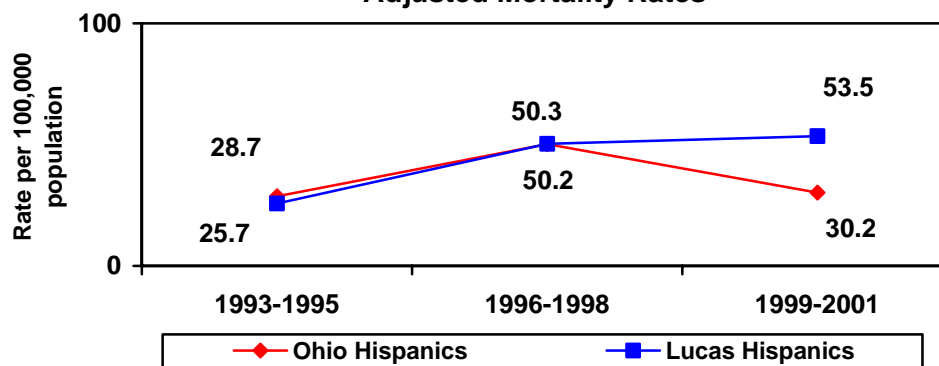
**Table 12 - Lucas County Hispanic/Latino Stroke Age-Adjusted Mortality Rates**



**Table 13 - Age-Adjusted Stroke Mortality Rates by Race/Ethnicity**



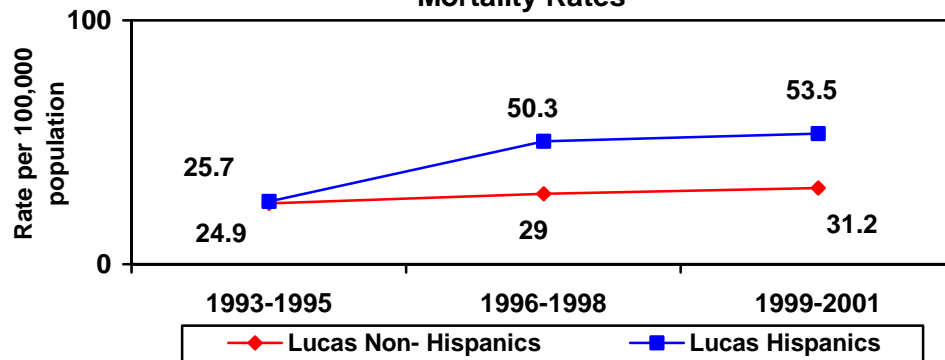
**Table 14 - Lucas County and Ohio Hispanic/Latino Diabetes Age-Adjusted Mortality Rates**



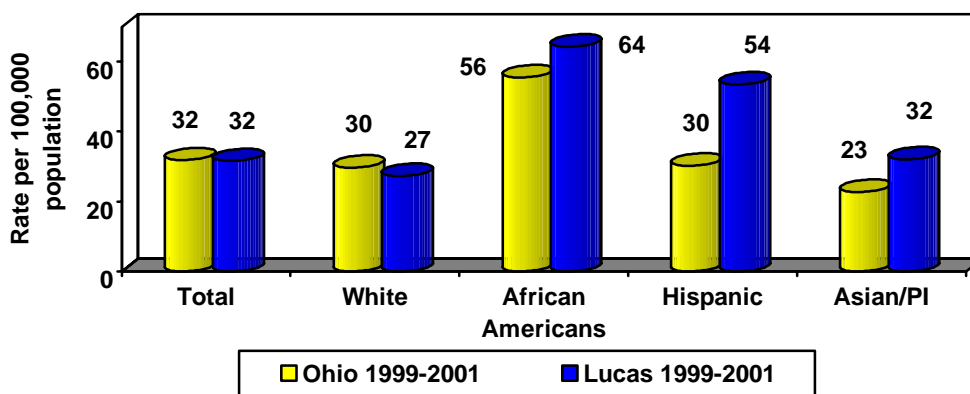
(Source: ODH Information Warehouse)

# Hispanic Health

**Table 15 - Lucas County Hispanic/Latino Diabetes Age-Adjusted Mortality Rates**



**Table 16 - Age-Adjusted Diabetes Mortality Rates by Race/Ethnicity**



(Source: ODH Information Warehouse)

# African American Health

## Key Findings

According to the 2000 U.S. Census, approximately 77,268 African Americans live in Lucas County (17.0%). The Ohio Department of Health, Information Warehouse, reports that 3,539 (61%) of the 5,780 African American deaths from 1993-2001 were from cardiovascular diseases (heart diseases and stroke) and cancers. The African American population was over-sampled during the 2003 Lucas County assessment to provide health status information specific to African Americans revealing a higher prevalence of coronary heart disease and diabetes when compared to Whites.

## Leading Causes of Death 1993-2001

Lucas African Americans Total Deaths (5,780)	Lucas White Population Total Deaths (34,799)
1. Heart Diseases (1,801)	1. Heart Diseases (12,625)
2. Cancers (1,361)	2. Cancers (8,016)
3. Stroke (377)	3. Stroke (2,363)
4. Diabetes (257)	4. Lung Diseases (1,975)
5. Lung Diseases (225)	5. Pneumonia & Influenza (998)

(Source: ODH Information Warehouse)

## General Health and Health Care Assessment Findings

**Due to a disproportionate number of African Americans surveyed in the lower income levels, rates for certain health behaviors, such as smoking, may be overestimated.**

- ◆ The survey data identifies that when compared to Whites, Lucas County African Americans are more likely to rate their health status as fair or poor (25% African American compared to 13% White) and they are less satisfied with their health care (27% African American rate it fair or poor compared to 14% of Whites).
- ◆ 28% of African American adults do not have health care coverage, compared to 14% of Whites.
- ◆ African American adults surveyed are less likely to have seen a dentist in the past year (52% compared to 70% of Whites).
- ◆ African American adult respondents are more likely to have been diagnosed with:
  - High blood pressure (33% compared to 25% of Whites)
  - Asthma (17% compared to 13% of Whites)
  - Angina or coronary heart disease (12% compared to 9% of Whites)
  - Diabetes (12% compared to 9% of Whites)
- ◆ African American surveyed adults are less likely than Whites to:
  - Have consumed alcohol in the past 30 days (57% compared to 42% of Whites).
  - Keep firearms in the household (16% compared to 23% of Whites).
- ◆ African American adults are more likely to be current tobacco users (39% compared to 26% of Whites).
- ◆ African American adults surveyed are more likely to have used marijuana in the past 30 days (16% compared to 7% of Whites).
- ◆ African American respondents are more likely to have had multiple sexual partners in the past year (19% compared to 10% of Whites).
- ◆ 61% of African American adults are obese or overweight according to the Body Mass Index (BMI).

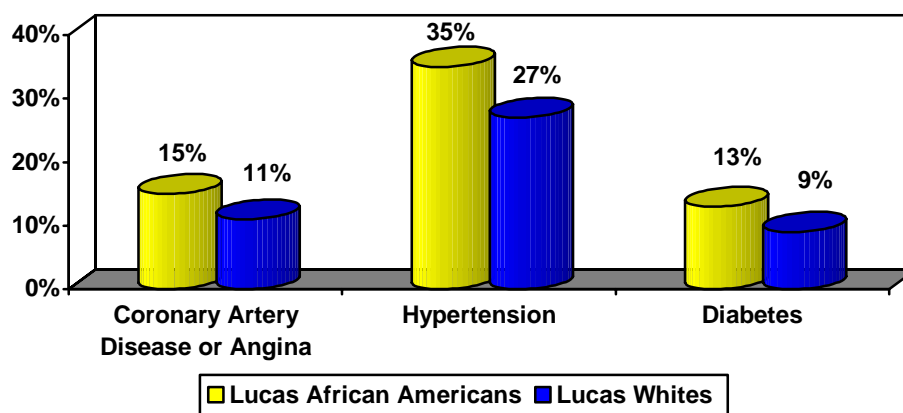
## High Blood Pressure (Hypertension) & African Americans

- ◆ African Americans have a greater risk of developing high blood pressure than other race/ethnic groups.
  - ◆ Research has found that African Americans tend to have an unusually high number of risk factors for high blood pressure including diabetes, overweight/obesity, high stress levels, high fat diet and salt sensitivity.
  - ◆ African Americans tend to be younger when diagnosed with hypertension than Whites.
  - ◆ African American hypertension is often more severe than what is seen in Whites.
  - ◆ Hypertension-related complications include stroke, death from heart disease, kidney failure and blindness.
- (Source: HeartCenter Online for Cardiologists & Their Patients, [www.heartcenteronline.com](http://www.heartcenteronline.com))

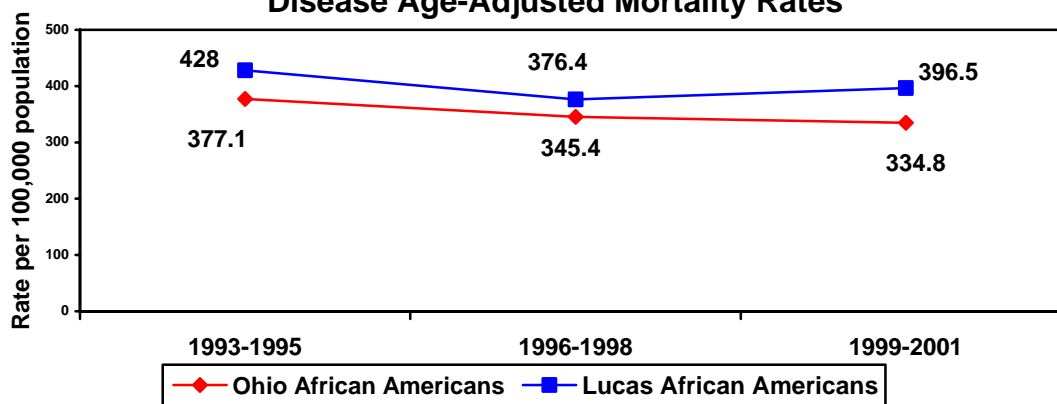
## African American Health

- ◆ For the reporting years of 1999-2001, the Lucas County age-adjusted heart disease mortality rate for African Americans was 21% higher than the rate for Whites (Table 3).
- ◆ The 1999-2001 Lucas County age-adjusted cancer mortality rate for African Americans was approximately 26% higher than the rate for Whites (Table 5).
- ◆ The 1999-2001 age-adjusted rate of African American deaths from stroke in Lucas County was nearly one-third higher than the rate for Whites (Table 8).
- ◆ The 1999-2001 Lucas County age-adjusted diabetes mortality rate for African Americans was 2.4 times higher than the rate for Whites (Table 10).
- ◆ The 1999-2001 age-adjusted rate of African American deaths from chronic lower respiratory diseases (formerly COPD) in Lucas County was 7% less than the rate for Whites (Table 12).

**Table 1 - Cardiovascular Disease & Diabetes Prevalence**



**Table 2 - Lucas County and Ohio African American Heart Disease Age-Adjusted Mortality Rates**

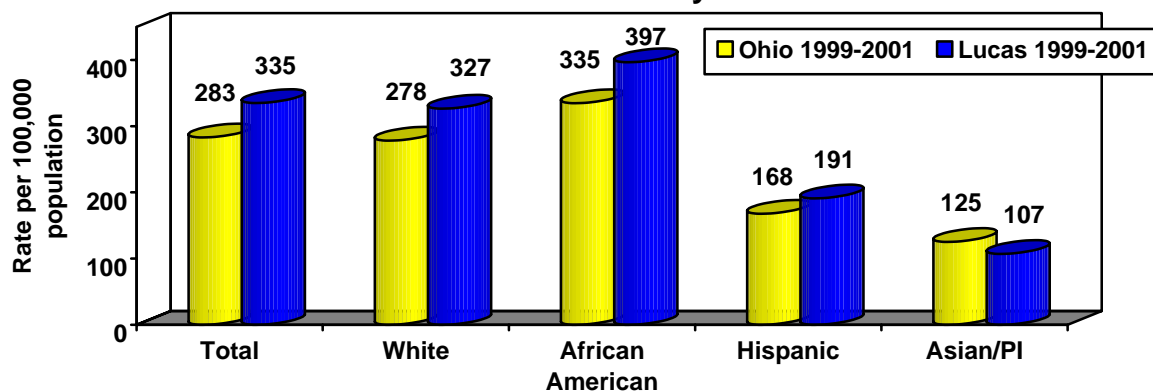


(Source: ODH Information Warehouse)

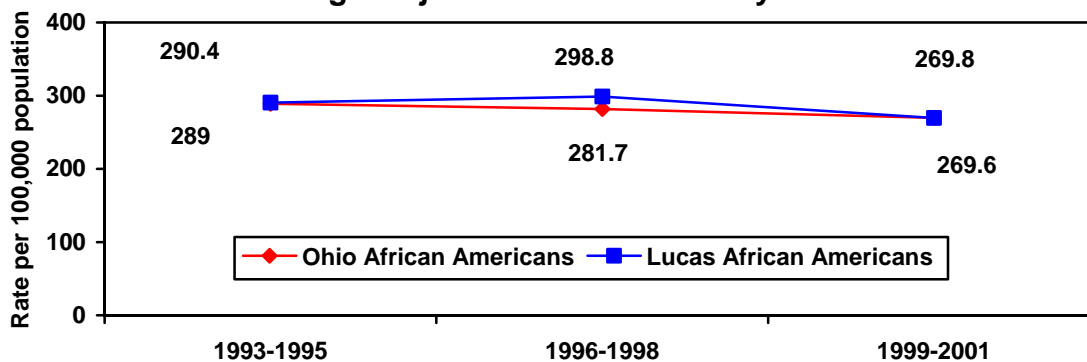


# African American Health

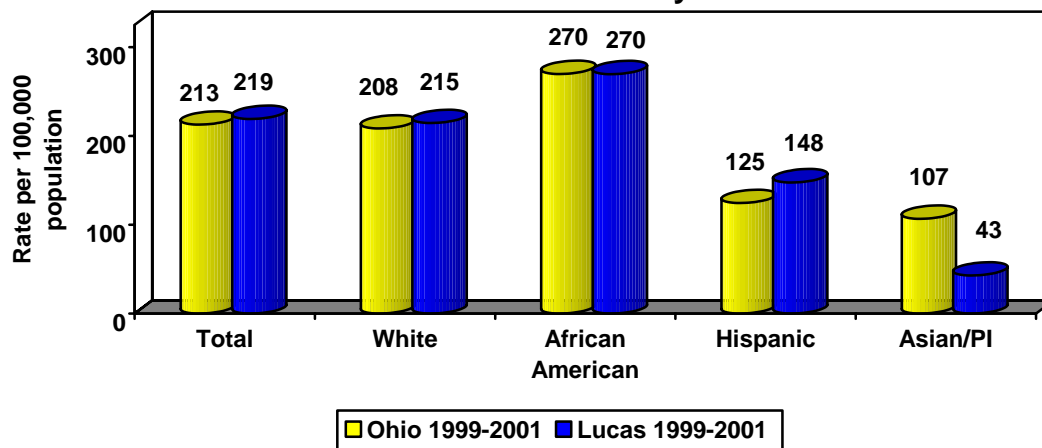
**Table 3 - Age-Adjusted Heart Disease Mortality Rates by Race/Ethnicity**



**Table 4 - Lucas County and Ohio African American Age-Adjusted Cancer Mortality Rates**



**Table 5 - Age-Adjusted Cancer Mortality Rates by Race/Ethnicity**



(Source for graphs: ODH Information Warehouse)

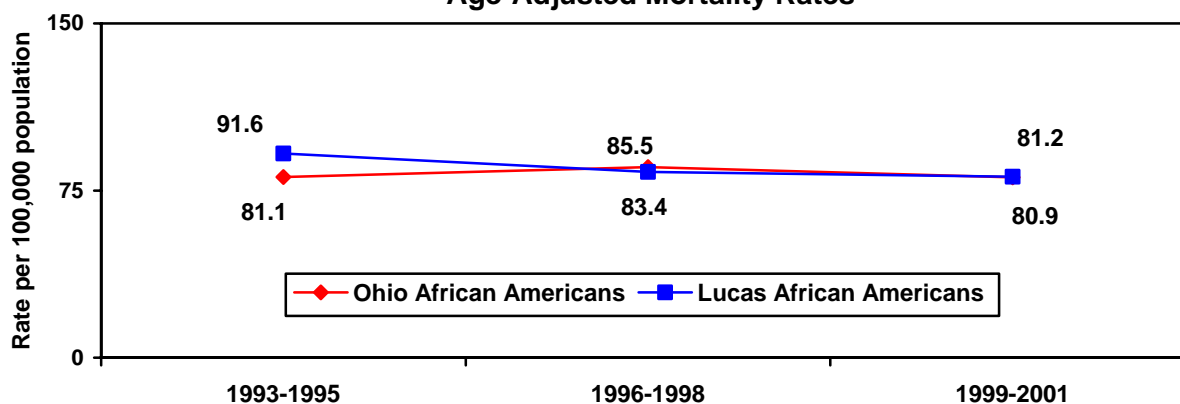
# African American Health

**Table 6 - Lucas County Cancer Mortality-1999-2001**

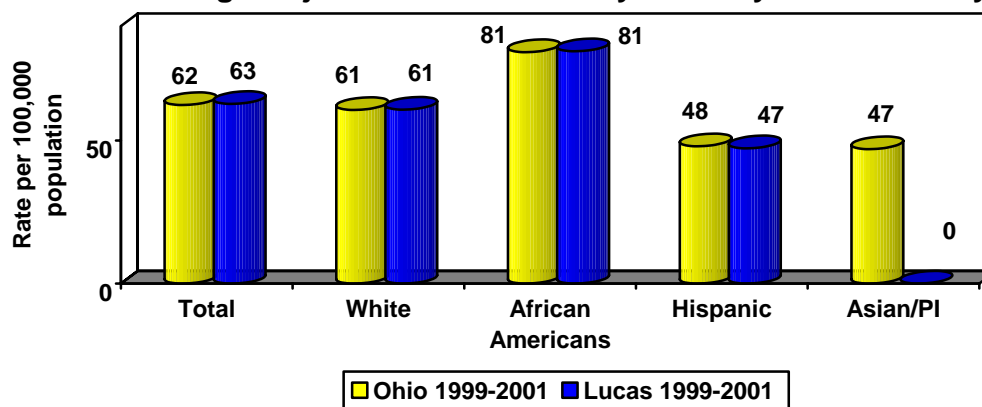
Type of Cancer	Percent of Total White Deaths	Type of Cancer	Percent of Total African American Deaths
Trachea, Bronchus & Lung	30%	Trachea, Bronchus & Lung	30%
Colon, Rectum & Anus	11%	Colon, Rectum & Anus	13%
Other & Unspecified Cancer	11%	Other & Unspecified Cancer	12%
Female Breast	7%	Female Breast	6%
Pancreas	5%	Pancreas	6%
Prostate	5%	Prostate	6%
Urinary System (Kidney, Bladder)	5%	Urinary System (Kidney, Bladder)	4%
Esophagus & Stomach	4%	Esophagus & Stomach	5%
Non-Hodgkins Lymphoma	5%	Non-Hodgkins Lymphoma	4%

(Source: ODH Information Warehouse)

**Table 7 - Lucas County and Ohio African American Stroke Age-Adjusted Mortality Rates**



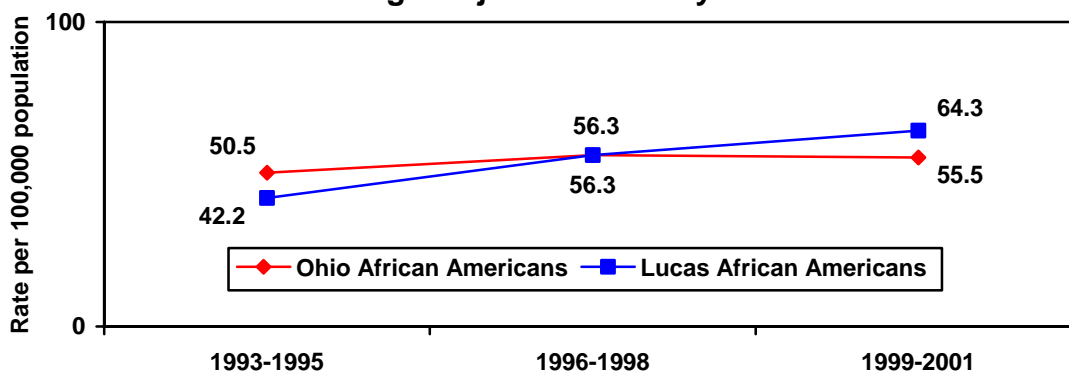
**Table 8 - Age-Adjusted Stroke Mortality Rates by Race/Ethnicity**



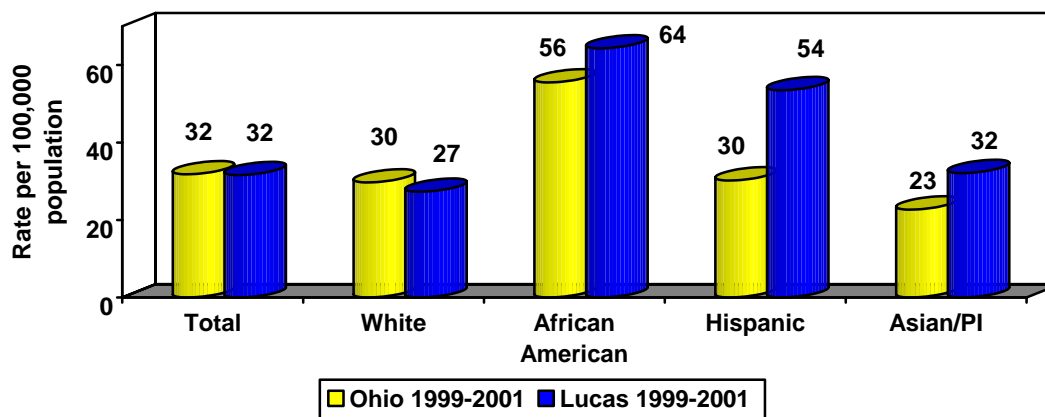
(Source for graphs: ODH Information Warehouse)

# African American Health

**Table 9 - Lucas County and Ohio African American Diabetes Age-Adjusted Mortality Rates**

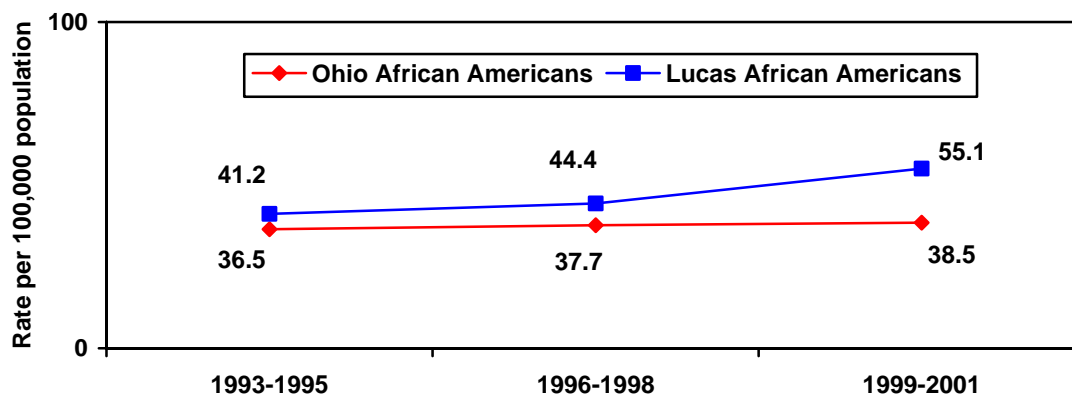


**Table 10 - Age-Adjusted Diabetes Mortality Rates by Race/Ethnicity**



**Table 11**

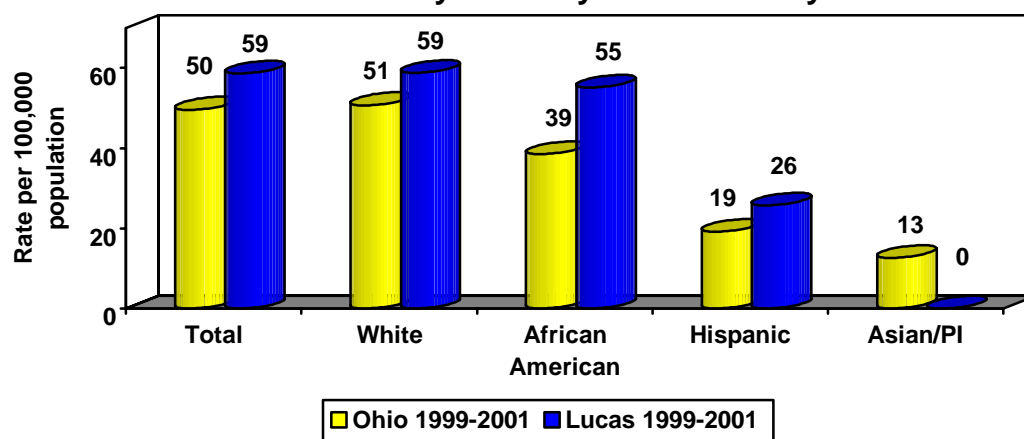
**Lucas County and Ohio African American Chronic Lower Respiratory Diseases (Formerly COPD) Age-Adjusted Mortality Rates**



(Source for graphs: ODH Information Warehouse)

## African American Health

**Table 12 - Age-Adjusted Chronic Lower Respiratory Disease  
Mortality Rates by Race/Ethnicity**



(Source: ODH Information Warehouse)

# Adult Sexual Behavior and Pregnancy Outcomes

## Key Findings

*This community health assessment has identified that 4% of all adults and 19% of those with multiple sexual partners have engaged in a behavior in the past 12 months that puts them at risk for contracting a sexually transmitted disease or infection (STD, STI) or HIV. Often drastically underestimated, STDs are one of the most common infections nationwide. Studies have shown that by age 24, one in three sexually active people will have contracted an STD. (Source: Planned Parenthood Federation of America, Inc.) In Lucas County, 19% of adults surveyed have engaged in a sexual activity following alcohol or other drug use that they would not have otherwise participated in if not under the influence.*

## Adult Sexual Behavior

- ◆ In Lucas County, 64% of adult respondents have had sexual intercourse in the past twelve months and 11% of all adults report having intercourse with more than one partner. Those most likely to have had multiple partners are 19-29 year-olds (21%) and African Americans (19%).
- ◆ Just under one in four (23%) sexually active adults surveyed used a condom the last time they had intercourse. This percentage increases to 52% of those who had more than one partner in the past year. Of those who used a condom during their last sexual encounter, 59% were motivated to do so to protect against disease. Those who have had more than one partner in the past year are more likely to use a condom to protect against disease (86% compared to 43% of those with one partner in the past year).
- ◆ Most surveyed adults are using birth control in an appropriate manner. Only 0.4% of all sexually active adults are not using birth control because they are unable to afford it and 1% are not using it because their partner does not want it used, figures which have not changed from those reported in 1999.
- ◆ Just under one in five (19%) Lucas County adult respondents have engaged in sexual activity following alcohol or other drug use that they would not have engaged in if they were not under the influence at some point in their life. This behavior is most common among the following groups:
  - Adults with multiple partners (37% compared to 21% with one partner in past year)
  - Adults who do not have health insurance (27% compared to 18% of those insured)
  - Males (23% compared to 16% females)
- ◆ According to this survey, just under one in ten (9%) Lucas County adults have been forced to have sexual intercourse at some time in their life, increasing to 12% among females.
- ◆ Nearly one in twenty (4%) of adults surveyed have engaged in a behavior in the past year that puts them at risk for contracting HIV. This percentage increases to 19% among those with multiple partners.

## Facts About Sexually Transmitted Infections (STI) In The U.S.

- ◆ Nearly two-thirds of all STIs occur in people less than 25 years of age.
- ◆ Overall, the incidence of STIs is rising in the U.S. yet, chlamydia has declined in areas that have screening and treatment programs.
- ◆ Chlamydia is the most commonly reported infectious disease in the U.S.
- ◆ Nearly 40% of women with untreated chlamydia will develop pelvic inflammatory disease (PID) and approximately 20% of women with PID will become infertile
- ◆ Young adults today are more likely to have multiple sexual partners during their lifetimes due to early initiation of sex, marrying later in life, and the increase in divorces.
- ◆ Many STIs are asymptomatic and can go undetected in both men and women.
- ◆ Some STIs are more common among African Americans and Hispanic individuals, including syphilis and gonorrhea.

*(Source: Tracking the Hidden Epidemics: Trends in STDs in the United States 2000, CDC and Planned Parenthood Federation of America, Inc.)*

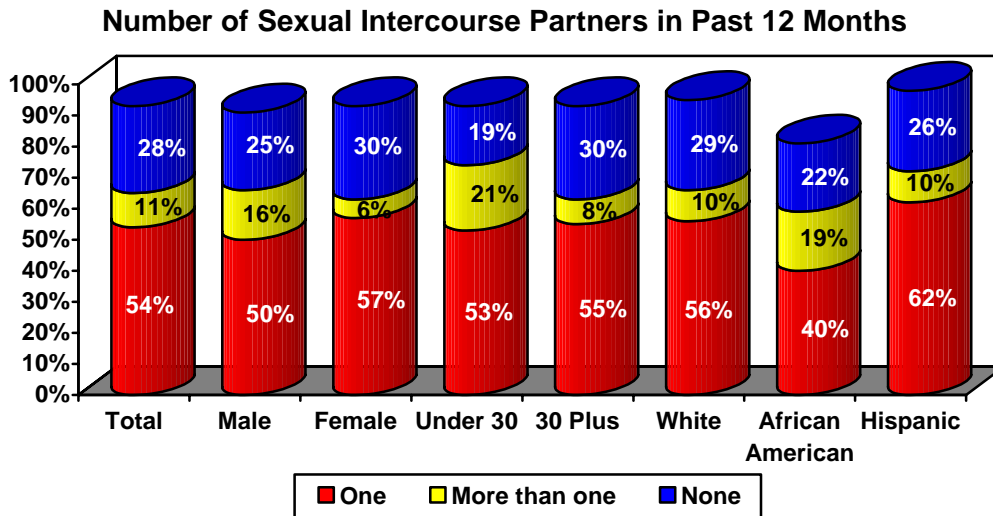
## Risk Factors for Contracting Sexually Transmitted Infections

- |   |   |
|---|---|
| ◆ Being female                                | ◆ Being a person <25 years of age                       |
| ◆ Living in a large urban area                | ◆ Having multiple partners                              |
| ◆ Using alcohol and other drug use during sex | ◆ Having sex with a new partner or at the first meeting |
| ◆ Not knowing the sexual history of a partner | ◆ Having sex without a condom                           |
| ◆ Having previous history of STD infection    | ◆ Exchanging sex for money or drugs                     |

*(Source: The Naked Truth about STDs, Pfizer, Inc., <http://www.unspeakable.com>)*

## Adult Sexual Behavior

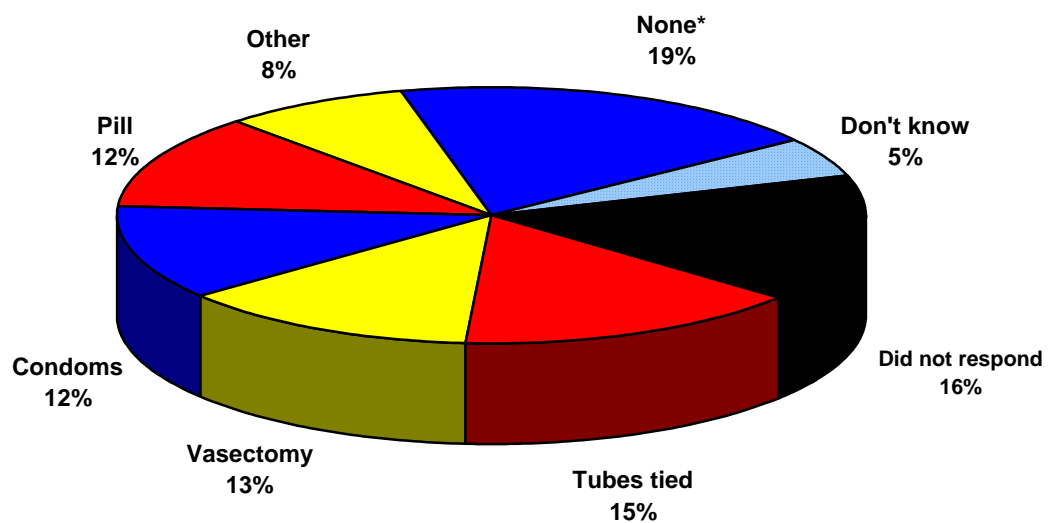
The following graphs show the percentage of Lucas County surveyed adults who are sexually active and the percentage using birth control. They show the number of residents in each segment giving each answer (i.e., the first graph shows that 54% of all adult respondents have had one sexual partner in the last 12 months and 11% have had more than one partner, 50% of males have had one partner, etc.).



*Respondents were asked:*

*“During the past 12 months, with how many different people have you had sexual intercourse?”*  
*(Percents do not add to 100% because not all respondents answered the question or could recall the answer.)*

### Birth Control Use Among Sexually Active Adults



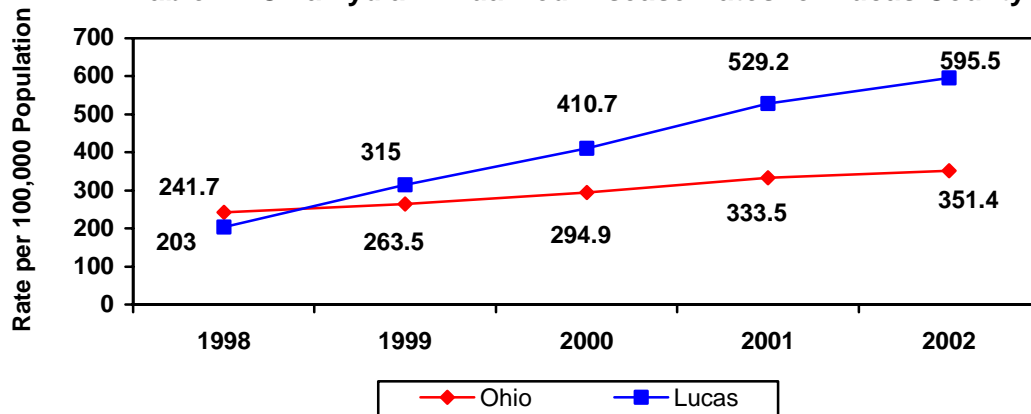
\* The category of “none” includes those who are not using birth control because they want to get pregnant (4%) or they/their partner currently is pregnant (1%).

## Adult Sexual Behavior

The following graphs show Lucas County chlamydia and gonorrhea disease rates per 100,000 population updated July 1, 2003 by the Ohio Department of Health. Between 1998 and 2002 there were 28 cases of primary and secondary syphilis reported for Lucas County.

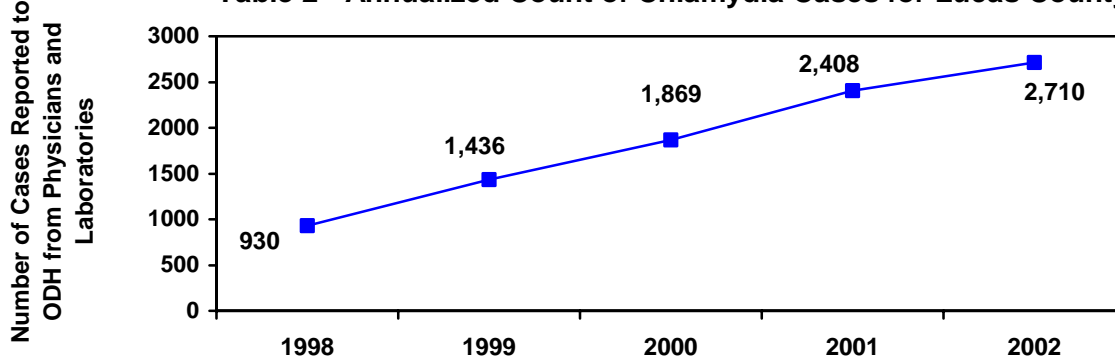
- ◆ Lucas County chlamydia rates have exceeded the state average since 1999 and remain on an increasing trend, averaging just over 2,300 cases per year from 2000-2002 (Table 2).
- ◆ In 2002, the Lucas County Chlamydia rate for females was just under four times the rate for males (Table 4).
- ◆ In 2002, the reported chlamydia rate for African Americans was nearly 12 times the rate reported for Whites and just over twice the rate for Lucas County (Table 1 and Table 3).
- ◆ The three-year average (1999-2001) chlamydia rate for Lucas County females ages 15-24 was 3,672.5 per 100,000 population compared to 2,653.5 per 100,000 for Ohio.
- ◆ The Lucas County reported gonorrhea rate has more than doubled from 1998-2002 (Table 5).
- ◆ In 2002, the gonorrhea rate for African Americans was nearly 28 times the rate reported for Whites and just under three times the rate reported for Lucas County (Table 5 and Table 7).

**Table 1 - Chlamydia Annualized Disease Rates for Lucas County**



(Source: ODH Information Warehouse)

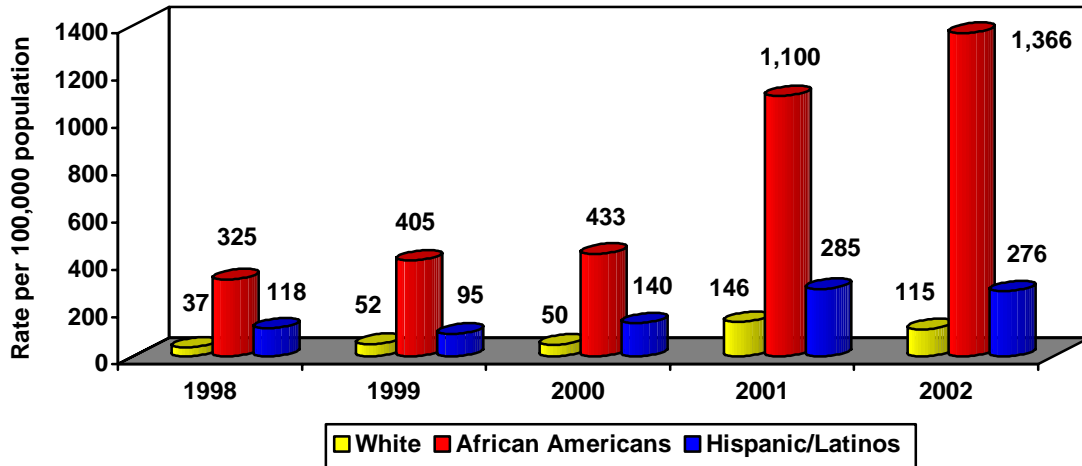
**Table 2 - Annualized Count of Chlamydia Cases for Lucas County**



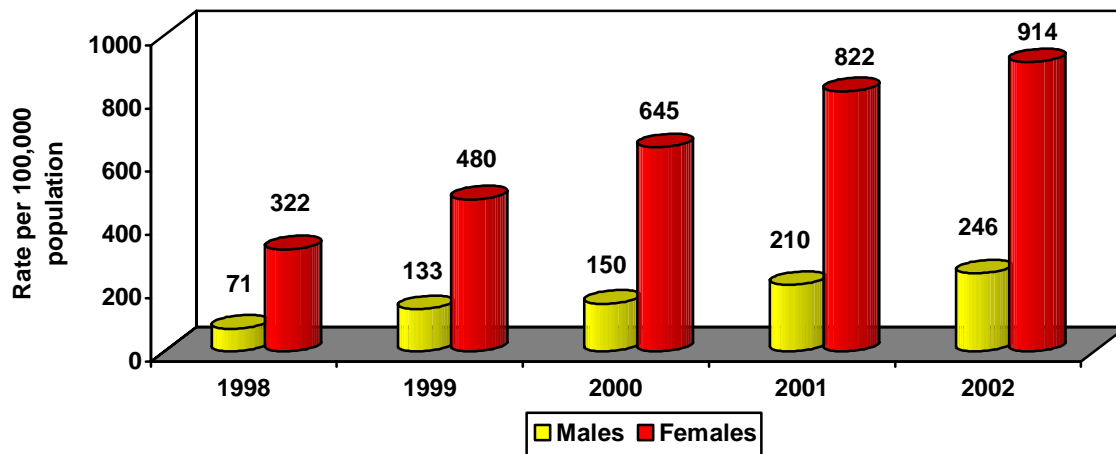
(Source: ODH Information Warehouse)

# Adult Sexual Behavior

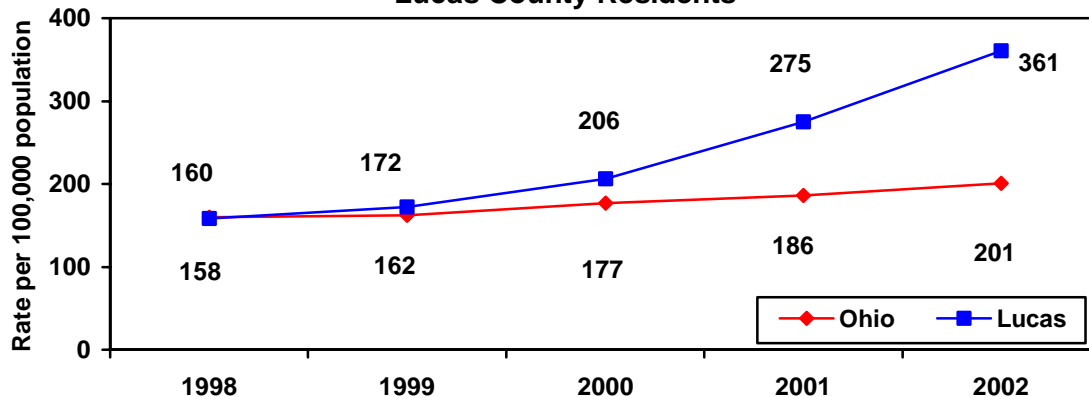
**Table 3 - Lucas County Chlamydia Rates by Race/Ethnicity**



**Table 4 - Lucas County Annualized Chlamydia Rates By Gender**



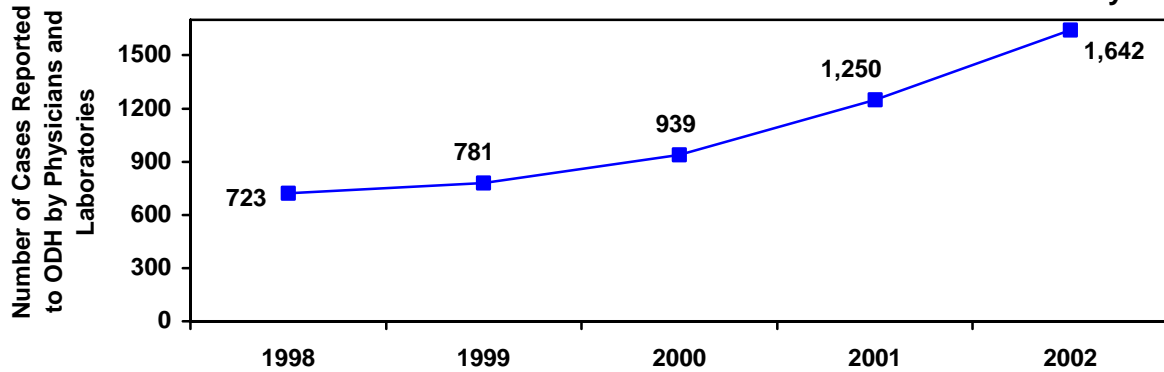
**Table 5 - Gonorrhea Annualized Disease Rates for Lucas County Residents**



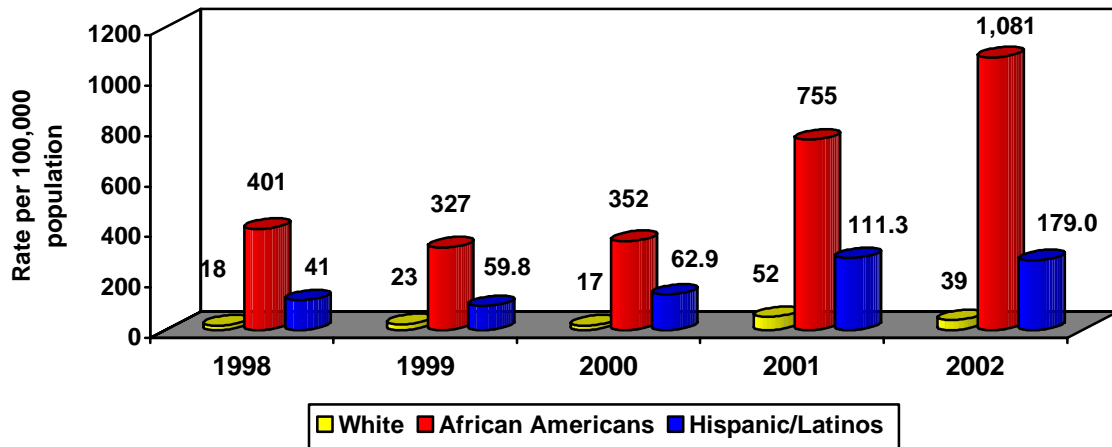


# Adult Sexual Behavior

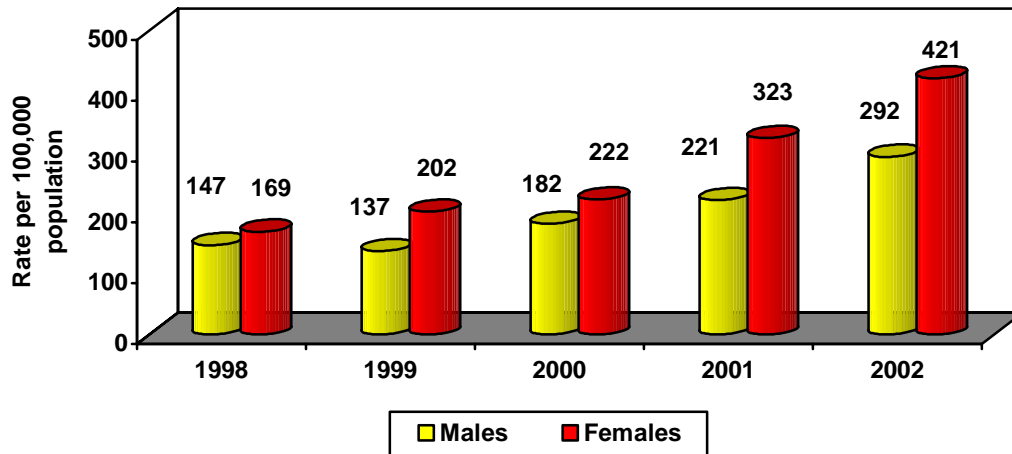
**Table 6 - Annualized Count of Gonorrhea Cases for Lucas County**



**Table 7 - Lucas County Annualized Gonorrhea Rates by Race/Ethnicity**



**Table 8 - Lucas County Annualized Gonorrhea Rates by Gender**

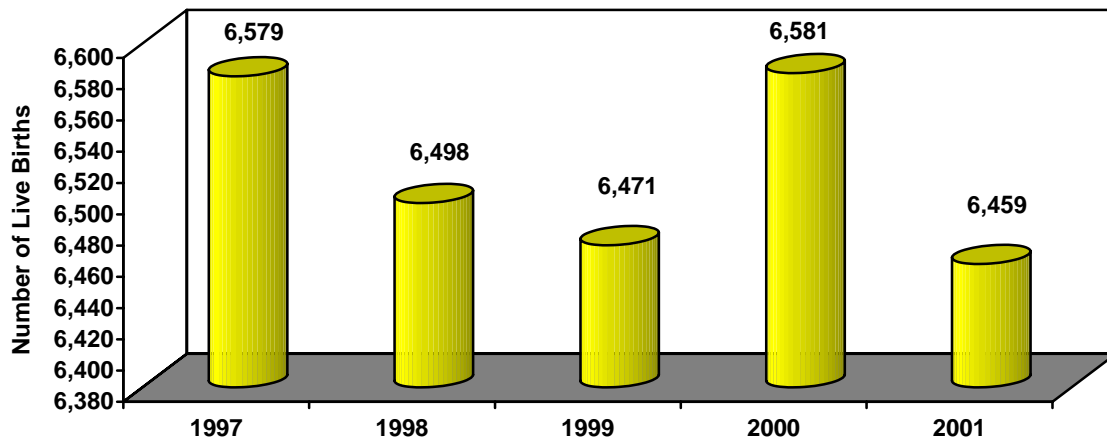


## Adult Sexual Behavior

### Pregnancy Outcomes

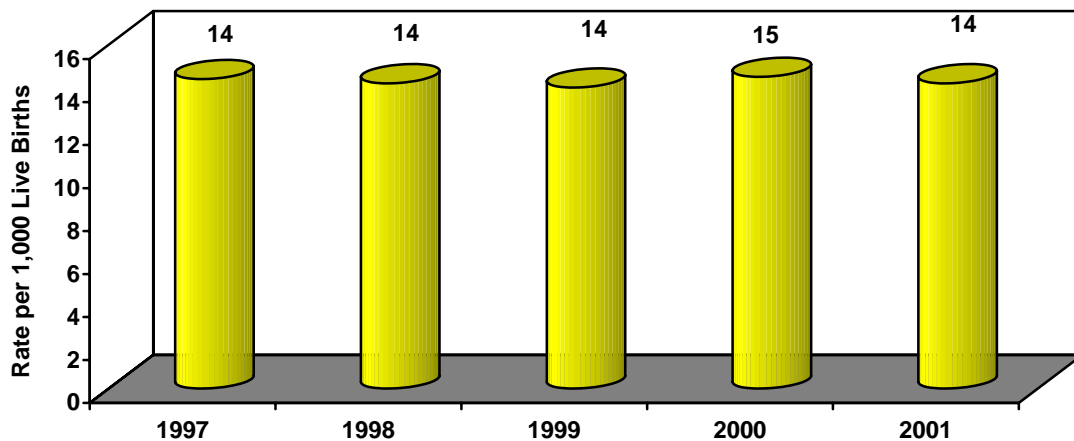
- ◆ From 1997-2001, there were an average of 6,518 live births per year in Lucas County (Table 9a).
- ◆ From 1999-2001, the number of abortions performed involving Lucas County residents steadily declined (Table 15).
- ◆ In 2001, 35% of abortions among Lucas County residents involved females 20-24 years old (Table 16).
- ◆ 89% of Lucas County mothers received first trimester prenatal care during 2000 and 2001 (Table 13).
- ◆ From 1996-2001, an average of 21% of Lucas County mothers reported smoking during their pregnancy (Table 12).
- ◆ The rate of unwed births in Lucas County remained at or near 44% from 1996-2001 (Table 11).

**Table 9a - Lucas County Total Births**



(Source: ODH Information Warehouse)

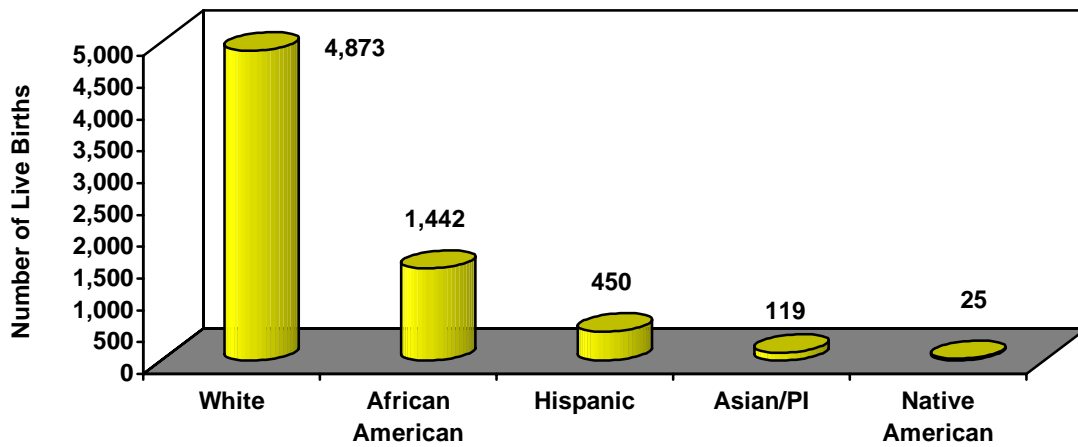
**Table 9b - Lucas County Crude Birth Rates**



(Source: ODH Information Warehouse)

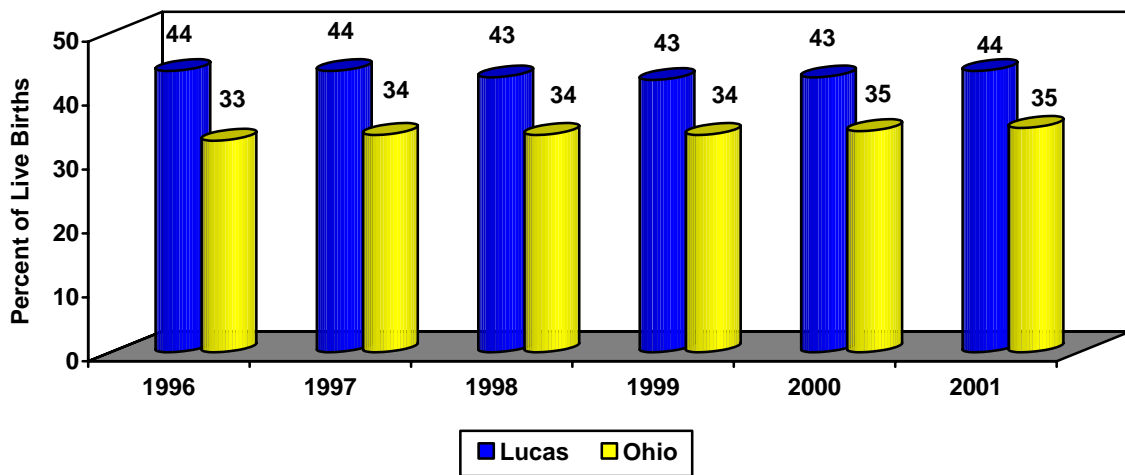
# Adult Sexual Behavior

**Table 10 - Lucas County Total Births By Race/Ethnicity  
2001**



(Source: ODH Information Warehouse)

**Table 11 - Lucas County Unwed Births**

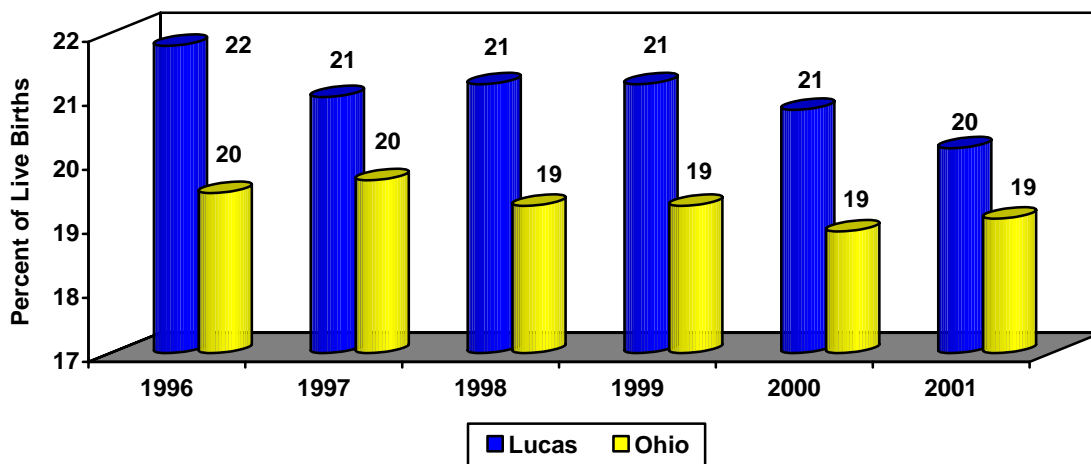


(ODH Information Warehouse)

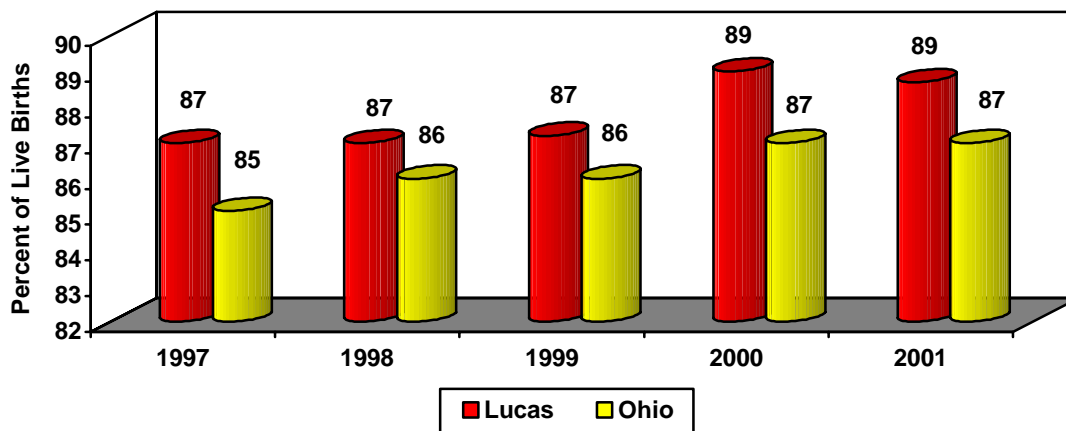
(Source:

## Adult Sexual Behavior

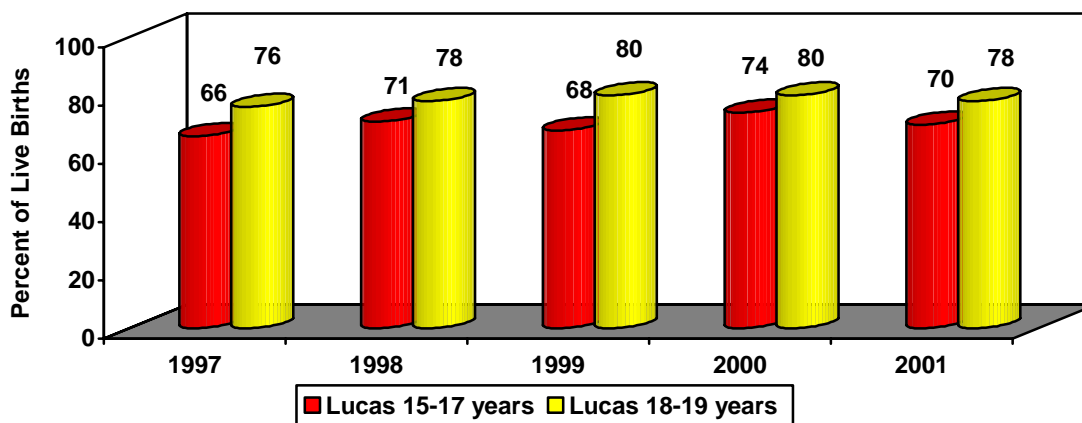
**Table 12 - Lucas County Births to Mothers Who Smoke**



**Table 13 - Lucas County Births with First Trimester Prenatal Care**



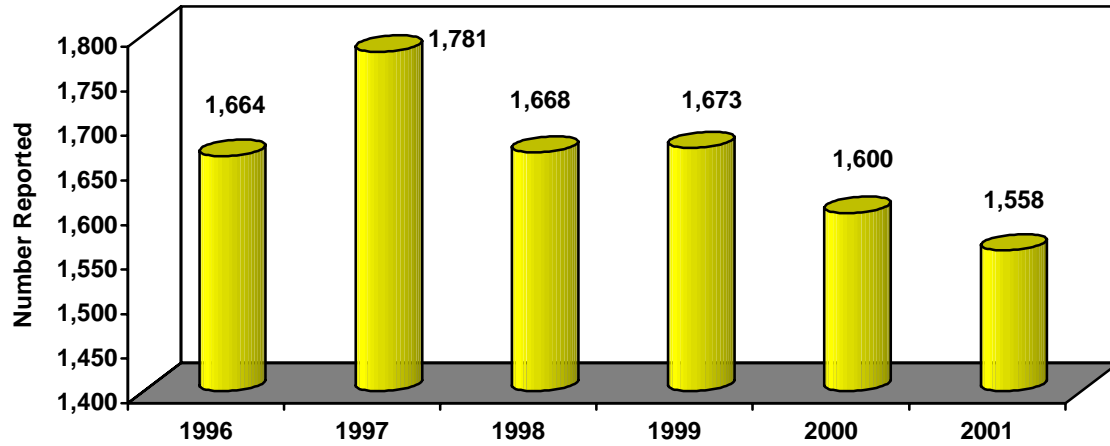
**Table 14 - Lucas County Teen Births with First Trimester Prenatal Care**



(Source: ODH Information Warehouse)

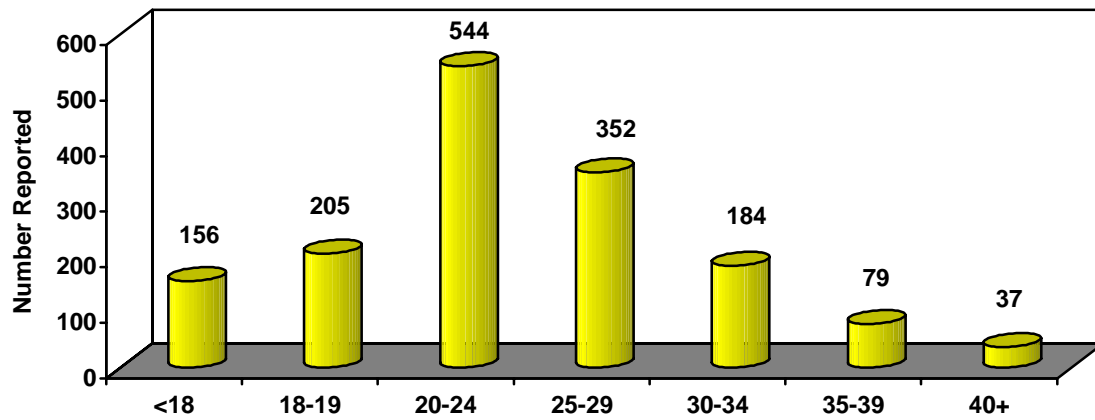
## Adult Sexual Behavior

**Table 15 - Lucas County Resident Induced Abortions**



(Source: ODH Information Warehouse)

**Table 16 - Lucas County Resident Induced Abortions By Age  
2001**



(Source: ODH Information Warehouse)

# Quality of Life, Mental Health, and Safety Issues

## Key Findings

*Forty percent of Lucas County adults surveyed suffer from a major impairment or health problem that limits their normal daily activities. Arthritis and back or neck problems are most commonly reported. The survey data identifies that about one in seven (14%) adults have felt so depressed that they gave up their usual activities at least once in the past year and 6% thought about committing suicide in the past year. A little under one half of*

*Hispanic (43%) and just over one third of African American (38%) adults consider their neighborhood to be slightly or not at all safe. One quarter (25%) of Lucas County adults report they live with an environmental concern (insects, rodents or plumbing problems) in their home.*

## Quality of Life

“Overall sense of well-being, including aspects of happiness and satisfaction with life as a whole” encompasses:

Health	Jobs	Housing
Schools	Culture	Neighborhoods
Values	Spirituality	

(Source: “Measuring Healthy Days”, CDC, Atlanta, GA, November 2000)

## Impairments and Health Problems

- ◆ 40% of Lucas County adults surveyed have a major impairment or health problem that limits their activities. The most commonly reported problems are arthritis or rheumatism (14%) and back or neck problems (10%). Adults over the age of 50 (55%) are most likely to report having an impairment or health problem that limits their activities.
- ◆ During the past 30 days, Lucas County residents in this survey had, on average, 2.5 days in which pain made it hard for them to do usual activities, such as self-care, work or recreation. This is less than Ohio (3.4 days) and national figures (3.5 days). (Source: 2001 BRFSS)
- ◆ 6% of all Lucas County adult respondents report that they have needed help with routine care needs such as shopping, everyday household chores and daily business as a result of an impairment or health problem.

## Social Context

- ◆ One-fifth (20%) of Lucas County adults surveyed consider their neighborhood to be slightly or not at all safe, increasing to 38% among African Americans and 43% among Hispanics.
- ◆ One-fourth (25%) of those surveyed reported environmental problems with their home. The top concerns were insects, rodents or plumbing problems (see chart on page 3). Fifty-one percent have checked their smoke detectors in the past six months, down from 59% reported in the 1999 assessment.
- ◆ 22% of Lucas County adult respondents keep a firearm in their home, compared to 24% as reported in the 1999 assessment and 6% keep a loaded and unlocked firearm in their home, compared to 4% reported in 1999. Those who report having firearms in 2003 use them for hunting (47%) and for protection (32%).
- ◆ From 1999-2003, the percentage of adults concerned about getting enough food for their family has increased from 12% to 16%. The 2003 percentage increases to 34% among low-income (less than \$25,000 yearly), 31% among African American, and 27% among Hispanic adults. About 1% of surveyed adults sought but did not get help for this problem in 2003.

## Risk Factors and Warning Signs of Suicide

Although suicide is often difficult to predict, a few risk factors include:

- |   |                            |                              |
|---|----------------------------|------------------------------|
| ◆ Mental health disorder, esp. depression                       | ◆ Substance abuse          | ◆ Stressful life event       |
| ◆ Prior suicide attempt   | ◆ Has experienced violence | ◆ Feeling socially isolated  |
| ◆ Experiences poor parent/child communication                   | ◆ Has medical condition    | ◆ Served time in jail/prison |
| ◆ Has access to lethal suicide methods (for instance, firearms) |                            |                              |

## Recognizing Warning Signs of Suicide in Others

- |   |   |
|---|---|
| ◆ Feelings of despair or hopelessness   | ◆ Taking care of business- preparing for the family's welfare         |
| ◆ Drug or alcohol abuse   | ◆ Rehearsing suicide or seriously discussing specific suicide methods |
| ◆ Shows signs of improvement, but in reality, relief comes from having made decision to commit suicide. |   |

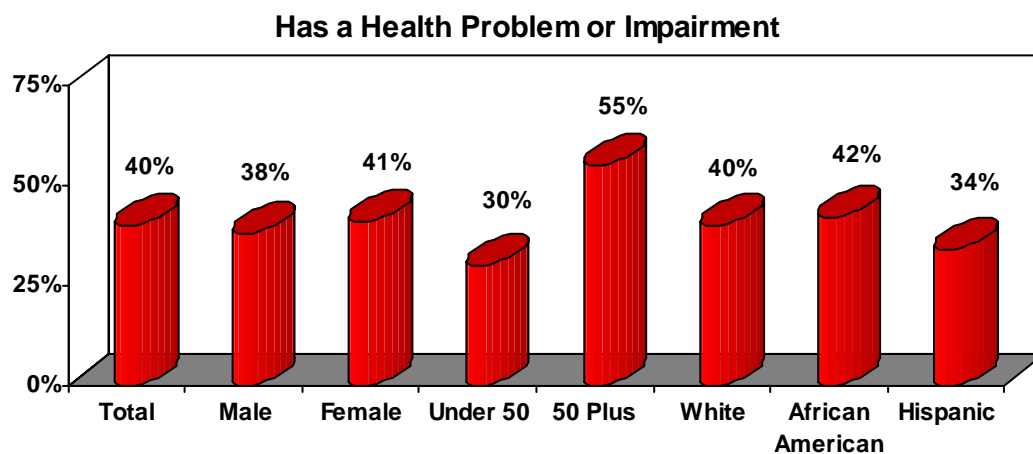
(Source: CDC, National Depression and Manic Depression Association)

## Quality of Life, Mental Health, and Safety Issues

### Mental Health

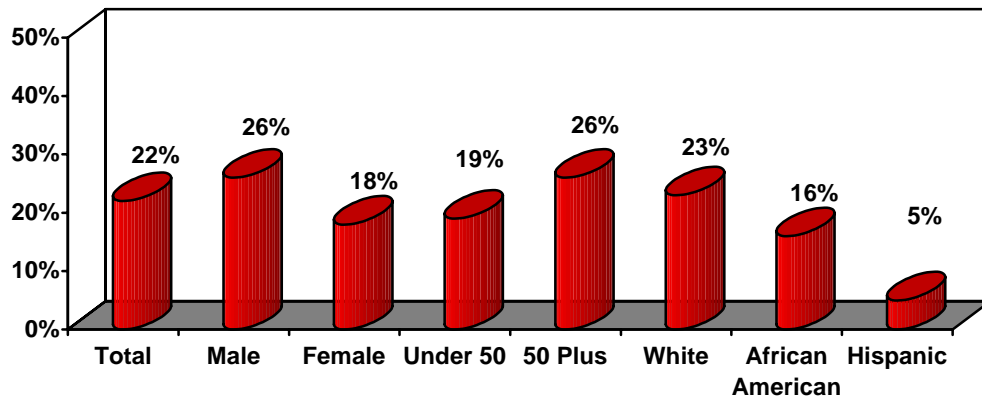
- ◆ On average, Lucas County adults reported the following symptoms:
  - 31% feel they did not get enough rest or sleep for at least 7 days out of the past 30 (lower than the 37% reported in 1999)
  - 27% felt worried, tense or anxious for at least 4 days out of the past 30 (compared to 35% in 1999)
  - 21% felt sad, blue or depressed at least 4 days out of the past 30 (25% reported in 1999)
  - 15% report being unable to participate in usual activities for at least 4 days out of the past 30 days
- ◆ Lucas County adults surveyed with household incomes under \$25,000 believe they would have trouble getting:
  - A \$50 loan (35% compared to 13% of higher income adults)
  - Help if bedridden (15% compared to 7% higher income adults)
  - Ride to doctor (11% compared to 7% higher income adults)
  - Somebody to talk to about problems (10% compared to 6% higher income adults)
- ◆ Just under one in seven (14%) of all adults reported feelings of depression (feeling so sad or hopeless almost every day for two weeks or more in a row) that they gave up their usual activities in the past year.
- ◆ In this survey, 6% of Lucas County adults contemplated suicide in the past 12 months.
- ◆ Those most likely to have feelings of depression include adults with lower incomes (22% compared to 11% with incomes greater than \$25,000) and adults under the age of 50 (17% compared to 8% of those over 50 years).
- ◆ Those most likely to have thoughts of suicide are adults with lower incomes (10% compared to 5% with incomes greater than \$25,000) and adults under the age of 50 (8% compared to 3% of those over 50 years).
- ◆ Results of this health assessment indicate mental health may be correlated with physical health. About 9% of Lucas County adults who self-define their health to be excellent or very good report being depressed compared to 24% of those reporting fair or poor health.

The following graphs of Lucas County data further detail the issues described in this section.

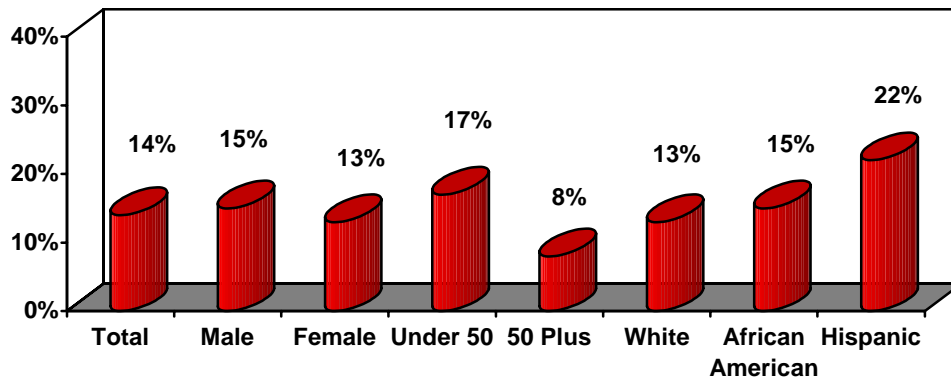


## Quality of Life, Mental Health, and Safety Issues

**Has a Firearm in the Home**

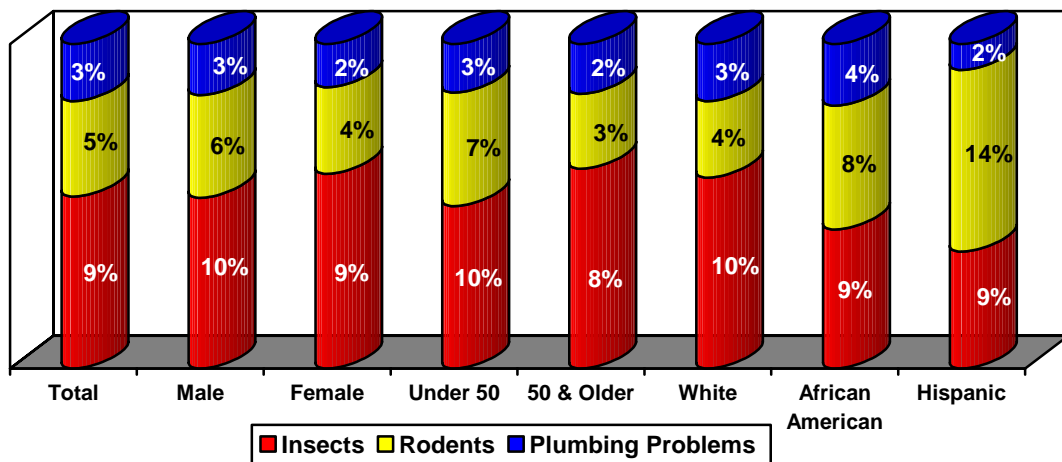


**Adults Feeling Depressed for Two or More Weeks in Past Year**



*Question asked: During the past 12 months, did you ever feel so sad or hopeless almost every day for two weeks or more in a row that you stopped doing some usual activities?*

**Environmental Problems**



*Question asked: In or around your household, which of the following do you think have threatened you or your family's health in the past year?*

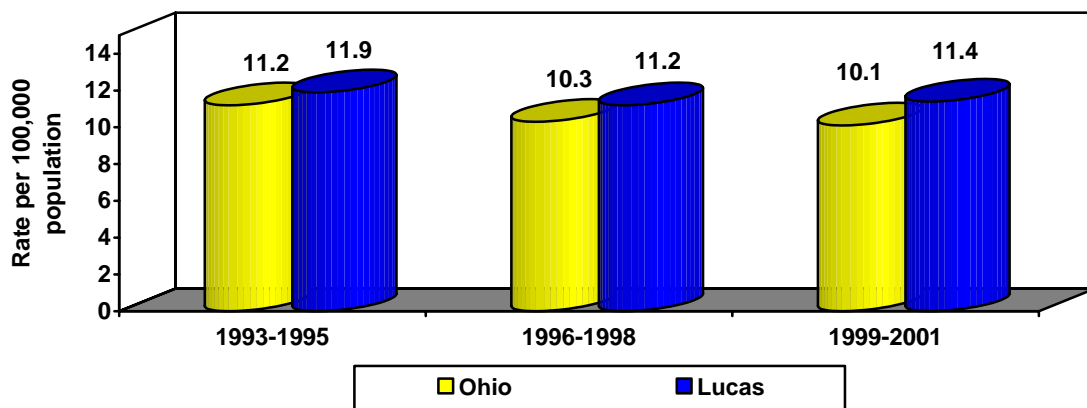


## Quality of Life, Mental Health, and Safety Issues

The following graphs show the Ohio and Lucas County age-adjusted suicide mortality rates per 100,000 population (adjusted to the appropriate 2000 standard) and the number of suicide deaths by age group for the county.

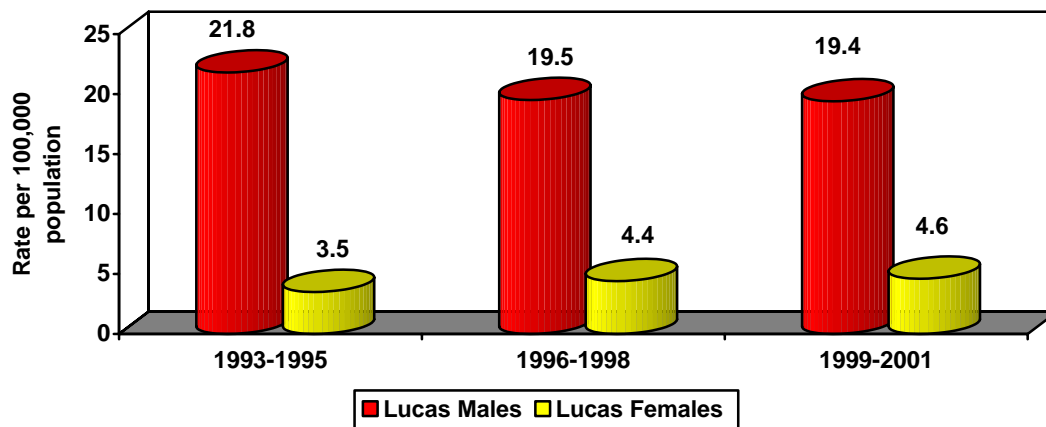
- ◆ The Lucas County age-adjusted suicide mortality rate remained at or near 11 deaths per 100,000 population from 1996-2001 (Table 1).
- ◆ The 1999-2001 Lucas County male age-adjusted suicide mortality rate is approximately 4 times the female rate (Table 2).
- ◆ From 1999-2001, 56% of all Lucas County suicide deaths occurred to those ages 15-44 years (Table 4).
- ◆ From 1999-2001, just over one in four Lucas County suicide deaths involved those ages 35-44 (Table 4).

**Table 1 - Lucas County Age-Adjusted Suicide Mortality Rates**



(Source: ODH Information Warehouse)

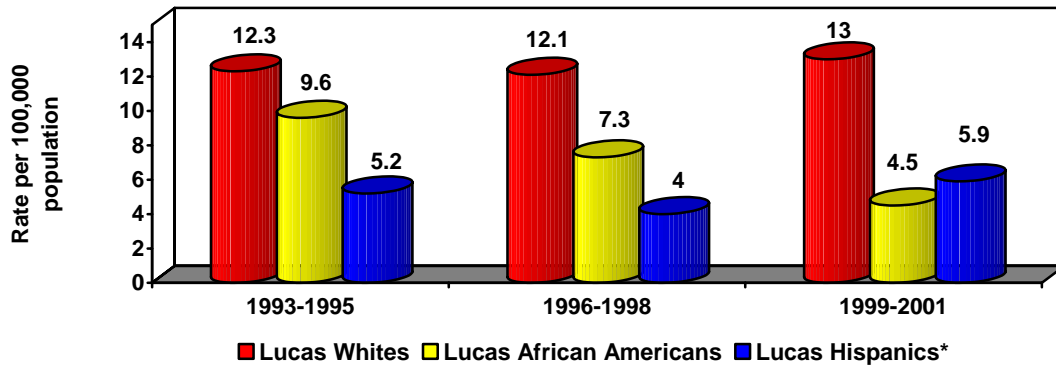
**Table - 2 Lucas County Age-Adjusted Suicide Mortality Rates By Gender**



(Source: ODH Information Warehouse)

## Quality of Life, Mental Health and Safety Issues

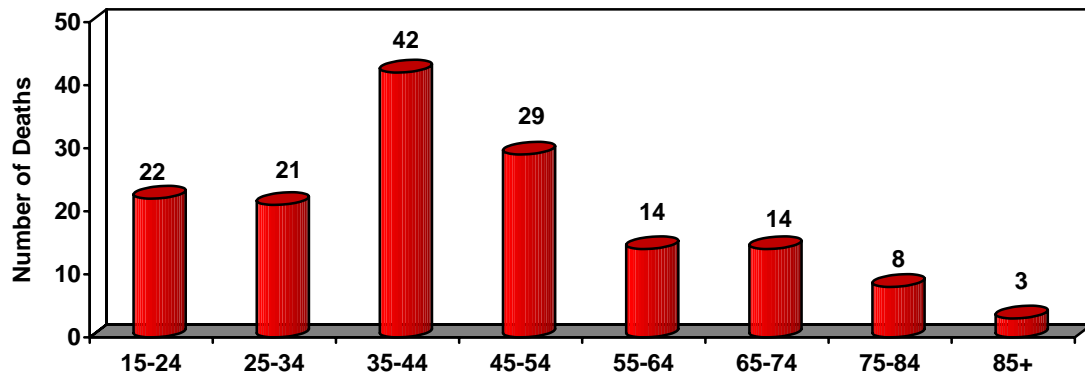
**Table 3 - Lucas County Age-Adjusted Suicide Mortality Rates By Race/Ethnicity**



*\*Please note that the Hispanic/Latino mortality rates were calculated with fewer than 5 deaths for all years reported.  
(Source: ODH Information Warehouse)*

**Table 4 - Lucas County Number of Suicide Deaths By Age Group 1999-2001**

**Total Deaths = 153**



*(Source: ODH Information Warehouse)*

# Children's Health

## Key Findings

*Approximately 8% of Lucas County adult parents report that their children currently do not have health care coverage. This increases to 13% of those surveyed with household incomes less than \$25,000 and 12% of African Americans. Nearly 14% of adults with children under five in the home live in a house built before 1978 that has peeling or chalking paint and just over half of those with children under five breastfed. The survey data indicates 82% of adults with children under five always use car seats, decreasing to 61% among African Americans. Over one-fourth (27%) of adults with children ages 5-11 years report their child always wears a helmet when riding a bike and the majority of parents surveyed reported that they have discussed sex, alcohol and drug use with their teenagers in the past month.*

## Health Care Access

- ◆ 15% of Lucas County adults surveyed said that their children have been without health care coverage sometime in the past year and about 8% still have children who are not insured. These percentages increase among those with a household income less than \$25,000 (13% of children currently uninsured) and African Americans (12% of children currently uninsured).
- ◆ Among working families, just under one-fifth (19%) report that someone in the household missed three or more days of work due to a child's illness or injury in the past year.

## Young Children (Under five years of age)

- ◆ In Lucas County, 14% of surveyed adults with children under five living in their homes said that their house was built before 1978 and they have peeling or chalking paint in their home.
- ◆ According to this survey, two out of five (39%) of those with children under five years never breastfed.
- ◆ 26% of surveyed parents of children under five who did breastfeed did so for more than 3 months.
- ◆ 82% of adults with children under five always use car seats, decreasing to 61% among African Americans.

## Older Children (Ages 5 – 18)

- ◆ 68% of Lucas County parents with 5 to 11-year-olds said their child does not always wear a helmet when he or she rides a bike and 42% report their child wears a helmet always or most of the time.
- ◆ Results of this health survey indicate 41% of parents said that their 5 to 11-year-old has had dental sealants.
- ◆ 46% of surveyed parents of adolescents or teenagers said their 12 to 18-year-old child has more than one hour of unsupervised time on an average school day.
- ◆ 76% of parents of adolescents or teenagers have discussed sex with their 12 to 18-year-old in the past month.
- ◆ Results of this survey indicate that 87% of parents of adolescents or teenagers discussed alcohol and drug use with their 12 to 18-year-old in the past month.

## Lucas County Leading Causes of Infant Death 1999-2001

**35 Deaths:** Low Birth Weight  
**29 Deaths:** Sudden Infant Death Syndrome  
**25 Deaths:** Congenital Malformations

## Leading Causes of Death for Ages 5-14 1999-2001

**15 Deaths:** Motor Vehicle Accidents  
**6 Deaths:** Other Accidents  
**4 Deaths:** Heart Disease

(Source: ODH Information Warehouse)

## Facts About Uninsured Kids

- ◆ More likely to miss school than insured children.
- ◆ Less likely to have a usual source of care.
- ◆ Parents are more likely to delay or avoid health care for their kids when it is needed.
- ◆ Less likely to receive the proper medical care for illnesses such as sore throats, earaches, and asthma.
- ◆ Less likely to see a doctor for routine yearly visits and more likely to have untreated vision problems.

(Source: Covering Kids & Families ([www.coveringkids.org](http://www.coveringkids.org)), Fact Sheet On Children's Health Care Coverage, 2003)

## Children's Health

### Healthy People 2010 Childhood Immunization Objectives

- ◆ Achieve and maintain effective vaccination coverage levels of universally recommended vaccines among young children.
- ◆ Increase in coverage levels of universally recommended vaccines:  
**1998 U.S. Baseline = 73% 2010 Target = 80%**
- ◆ Children aged 19-35 months who received the recommended vaccines (4 DTP, 3 polio, 1 MMR, 3 Hib, 3 Hep B)
- ◆ Adolescents aged 13-15 years who receive the recommended vaccines (3 or > doses of Hep B, 2 or > doses of MMR, 1 or > doses of tetanus-diphtheria booster, 1 or > doses of Varicella excluding children who have had Varicella).

*(Source: Healthy People 2010, Chapter 14, Immunization and Infectious Diseases)*

### Toledo-Lucas County Health Department Immunization Data Recorded Coverage for Children 24-35 Months of Age Percent Receiving Vaccine Series by 24 Months

Vaccine Series	Lucas 2002 Percent and (Number)	Lucas Through July 2003 Percent and (Number)
DTP1	98% (117)	100% (294)
DPT2	96% (115)	93% (274)
DTP3	86% (103)	77% (225)
DTP4	57% (68)	47% (138)
OPV1	98% (117)	99% (290)
OPV2	94% (113)	91% (269)
OPV3	79% (95)	61% (179)
MMRI	88% (105)	66% (294)
HIB1	97% (116)	100% (293)
HIB2	93% (112)	92% (271)
HIB3	79% (95)	74% (219)
HIB4	53% (64)	43% (125)
HepB1	98% (118)	100% (294)
HepB2	96% (115)	97% (285)
HepB3	82% (98)	78% (229)

*(Source: Toledo-Lucas County Health Department, Single Antigen Assessment Results for Dates of Birth Between 01/13/2000 and 01/11/2001)*

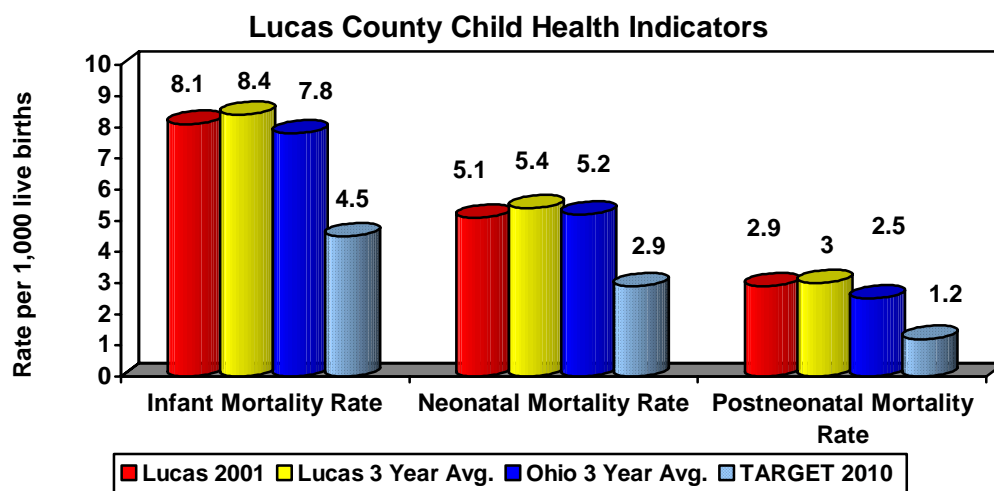
# Children's Health

## Lucas County Maternal & Child Health Indicators

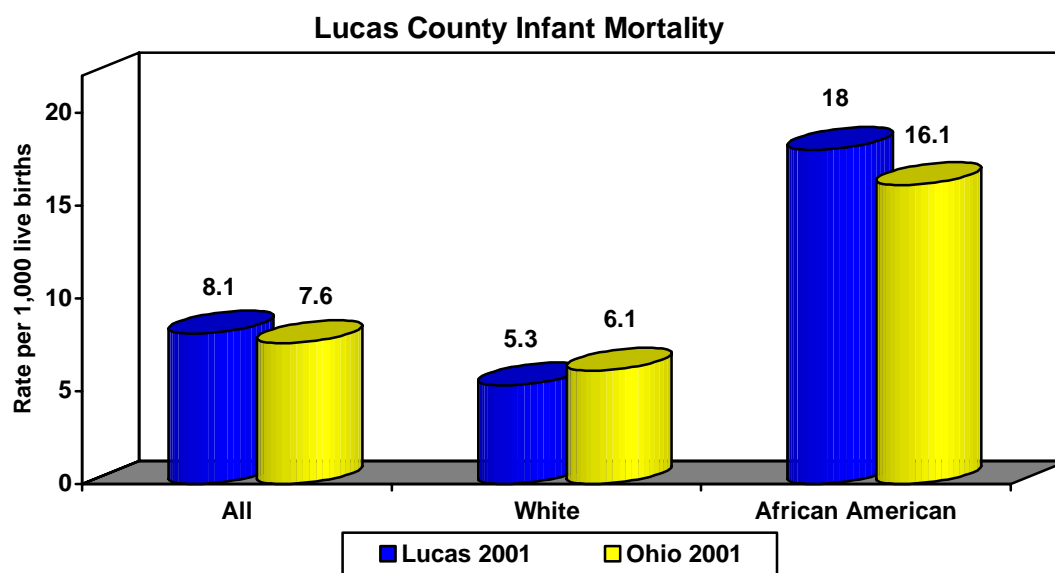
Indicator	Lucas 2001	Lucas 3 Year Average	Ohio 3 Year Average	Healthy People 2010 Goal
Received first trimester prenatal care	89% All Mothers 77% African American 81% Hispanic/Latinos	89%	86%	90%
Rate of teen births (per 1,000 females ages 15-17 years)	26.7	28.7	25.0	N/A
Very low birth weight (% of all births)	1.5%	1.6%	1.5%	0.9%
Very low birth weight infants delivered at Level III facilities	N/A	84%	62%	N/A
Perinatal mortality rate per 1,000 live births + late fetal deaths*	6.7	7.5	7.2	N/A
Ratio of black to white perinatal mortality rate**	1.6	2.5	2.1	N/A
Child death rate (1-14 years) per 100,000 children ages 1-14	20.3	23.9	20.8	N/A
Child motor vehicle crash death rate (1-14 years) per 100,000 children ages 1-14	7.5	7.5	3.2	N/A

\*Perinatal deaths = number of late fetal deaths (28 weeks plus gestation) plus infant deaths within 7 days of birth.

\*\*African American to white perinatal mortality rate= African American perinatal death rate divided by white perinatal death rate.  
(Source: ODH Information Warehouse)



## Children's Health



(Source: ODH Information Warehouse)

## Lucas County Adult Health Assessment Information Sources

Source	Data Used	Website
Adolescent and School Health, Prevent Alcohol and Drug Abuse Fact Sheet, Centers for Disease Control	♦ Youth alcohol use consequences	<a href="http://www.cdc.gov">www.cdc.gov</a>
Advance Data From Vital and Health Statistics, National Center for Health Statistics, CDC, Number 328, June 5, 2002	♦ Asthma facts	<a href="http://www.cdc.gov/nchs">www.cdc.gov/nchs</a>
Agency for Healthcare Research and Quality (AHRQ),	♦ Hispanic health statistics	<a href="http://www.ahrpr.gov">www.ahrpr.gov</a>
American Cancer Society, Tobacco Use Fact Sheets	♦ Smoking statistics	<a href="http://www.cancer.org">www.cancer.org</a>
American Cancer Society, Cancer Facts and Figures 2003. Atlanta: ACS, 2003	♦ Cancer rates	<a href="http://www.cancer.org">www.cancer.org</a>
American Diabetes Association	♦ Risk factors for diabetes	<a href="http://www.diabetes.org">www.diabetes.org</a>
American Heart Association. <i>Heart and Stroke Statistics-2001, 2002 and 2003</i> . Dallas, Tex.: American Heart Association; 2001, 2002 and 2003.	♦ Cardiovascular disease risk factors	<a href="http://www.americanheart.org">www.americanheart.org</a>
Behavioral Risk Factor Surveillance System, National Center for Chronic Disease Prevention and Health Promotion, Behavioral Surveillance Branch, Centers for Disease Control	♦ 1999, 2000, 2001, 2002 adult Ohio and U.S. correlating statistics	<a href="http://www.cdc.gov">www.cdc.gov</a>
CDC WONDER	♦ U.S. mortality statistics	<a href="http://wonder.cdc.gov">http://wonder.cdc.gov</a>
Centers for Disease Control FASTSTATS	♦ U. S. mortality statistics	
Covering Kids & Families, Fact Sheet On Children's Health Care Coverage, National Program of Robert Wood Johnson Foundation, 2003	♦ National uninsured children facts.	<a href="http://www.coveringkids.org">www.coveringkids.org</a>
Data Bulletin-Children's Health Insurance Coverage in Ohio, 1999-2001, Ohio Department of Health	♦ Profile of the status of health insurance of Ohio's children	<a href="http://www.odh.state.oh.us">www.odh.state.oh.us</a>
FASTSTATS A to Z, U.S. Department of Health and Human Services, Centers for Disease Control and Prevention, National Center for Health Statistics, Division of Data Services	♦ U.S. mortality statistics	<a href="http://www.cdc.gov/nchs/fastats">www.cdc.gov/nchs/fastats</a>
Healthy People 2010, U.S. Department of Health and Human Services, January 2000	♦ All Healthy People 2010 target data points ♦ Some U.S. baseline statistics	<a href="http://www.health.gov/healthypeople">www.health.gov/healthypeople</a>
Health Topics A-Z, Centers for Disease Control and Prevention	♦ Risk factors for arthritis ♦ Cardiovascular disease risk factors ♦ Definitions for obese, overweight, and body mass index ♦ Health risks associated with obesity	<a href="http://www.cdc.gov">www.cdc.gov</a>

## Lucas County Adult Health Assessment Information Sources

Source	Data Used	Website
HeartCenter Online for Cardiologists & Their Patients	♦ African American Hypertension Statistics	<a href="http://www.heartcenteronline.com">www.heartcenteronline.com</a>
Lucas County Adult Health Assessment Survey 2003, Conducted by Great Lakes Marketing	♦ Lucas County information	N/A
Measuring Healthy Days, Centers for Disease Control Atlanta, GA, November 2000	♦ Health-Related Quality of Life (HRQOL) ♦ Definition of quality of life	<a href="http://www.cdc.gov">www.cdc.gov</a>
National Arthritis Action Plan: A Public Health Strategy, Arthritis Foundation, the Association of State and Territorial Health Officials, and Centers for Disease Control, 1999	♦ Risk factor for arthritis	<a href="http://www.arthritis.org/resources">www.arthritis.org/resources</a>
National Center for Chronic Disease Prevention and Health Promotion, CDC	♦ US alcohol-related motor vehicle crashes and intentional injury stats	<a href="http://www.cdc.gov">www.cdc.gov</a>
National Household Survey on Drug Abuse (NHSDA), SAMHSA, 2001	♦ U.S. prescription drug abuse facts	<a href="http://www.samhsa.gov/oas/nhsda.htm">www.samhsa.gov/oas/nhsda.htm</a>
National Institute of Diabetes and Digestive Kidney Disease	♦ Risk factors for diabetes	<a href="http://www.niddk.nih.gov">www.niddk.nih.gov</a>
National Institute on Drug Abuse, National Institutes of Health, U.S. Department of Health and Human Services	♦ Commonly abused prescription drug facts	<a href="http://www.nida.nih.gov">www.nida.nih.gov</a>
Ohio Department of Public Safety	♦ 2002 Traffic Crash Facts, 2001 Traffic Crash Facts ♦ Lucas County and Ohio crash facts	<a href="http://www.state.oh.us/odps">www.state.oh.us/odps</a>
Ohio Department of Health, Information Warehouse	♦ Lucas County and Ohio mortality statistics ♦ Lucas County and Ohio birth statistics ♦ Lucas County and Ohio sexually transmitted diseases	<a href="http://www.odh.state.oh.us">www.odh.state.oh.us</a>
Ohio Family Health Survey Bulletin: Uninsured Rates in Ohio by County, 1998	♦ County health insurance coverage stats	<a href="http://www.odh.state.oh.us">www.odh.state.oh.us</a>
Ohio Medicaid Report, January 2003 Update, Office of Ohio Health Plans (OHP), Ohio Job & Family Services	♦ Lucas County and Ohio Medicaid statistics	<a href="http://www.services4aging.org">www.services4aging.org</a>
Ohio State Health Resources Plan 2001, Ohio Department of Health	♦ General health statistics for Lucas County and Ohio	<a href="http://www.odh.state.oh.us">www.odh.state.oh.us</a>
Preventing Suicide, Safe USA, Centers for Disease Control	♦ Risk factors for suicide	<a href="http://www.cdc.gov">www.cdc.gov</a>
Rationale for the 2001 Questionnaire, Alcohol and Other Drug Abuse, Youth Risk Behavior Surveillance System, U.S. Department of Health and Human Services, Public Health Service, Centers for Disease Control	♦ Youth alcohol abuse facts	<a href="http://www.cdc.gov">www.cdc.gov</a>



## Lucas County Adult Health Assessment Information Sources

Source	Data Used	Website
<i>Sexually Transmitted Infections</i> , Planned Parenthood Federation of America, Inc., Fact Sheet	◆ Facts about sexually transmitted infections in the U.S.	<a href="http://www.plannedparenthood.org">www.plannedparenthood.org</a>
Society for Women's Health Research	◆ Women's health facts	<a href="http://www.womens-health.org">www.womens-health.org</a>
The Ohio Cancer Incidence Surveillance System	◆ Cancer incidence statistics for Lucas County and Ohio	<a href="http://www.odh.state.oh.us">www.odh.state.oh.us</a>
<i>The Naked Truth About Sexually Transmitted Diseases</i> , Pfizer, Inc.	◆ Risk factors for contracting sexually transmitted diseases	<a href="http://www.unspeakable.com">www.unspeakable.com</a>
The National Women's Health Center, US Dept. of Health and Human Services	◆ US women's health statistics ◆ Benefits of quitting smoking	<a href="http://www.4woman.gov">www.4woman.gov</a>
<i>The State of Poverty in Ohio 2003</i> , Ohio Association of Community Action Agencies	◆ Ohio poverty statistics	<a href="http://www.oacaa.org">www.oacaa.org</a>
<i>Tracking the Hidden Epidemics: Trends in STDs in the United States 2000</i> , Centers for Disease Control	◆ Facts about sexually transmitted infections	<a href="http://www.cdc.gov/nchstp/std/Stats_Trends/Trends2000.pdf">www.cdc.gov/nchstp/std/Stats_Trends/Trends2000.pdf</a>
University of Virginia Library, Geospatial & Statistical Data Center	◆ Lucas County Uniform Crime Reports	<a href="http://fisher.lib.virginia.edu/">http://fisher.lib.virginia.edu/</a>
U.S. Census Bureau, United States Department of Commerce	◆ Ohio and Lucas County 2000 Census demographic information	<a href="http://www.census.gov">www.census.gov</a>
Youth Risk Behavior Surveillance System, U.S. Department of Health and Human Services, Public Health Service, Centers for Disease Control	◆ 2001 Rationale for the Questionnaire, Alcohol and Other Drug Abuse	<a href="http://www.cdc.gov">www.cdc.gov</a>

# Lucas County

## Adult Health Assessment

### List of Acronyms and Terms

<b>Adult</b>	Defined as 19 years of age and older.
<b>Age-Adjusted Mortality Rates</b>	Death rate per 100,000 adjusted for the age distribution of the population.
<b>Binge drinking</b>	Consumption of five alcoholic beverages or more on one occasion.
<b>BMI</b>	Body Mass Index is defined as the contrasting measurement/relationship of weight to height.
<b>BRFSS</b>	Behavior Risk Factor Surveillance System, an adult survey conducted by the CDC.
<b>CDC</b>	Centers for Disease Control and Prevention.
<b>Current Smoker</b>	Individual who has smoked at least 100 cigarettes in their lifetime and now smokes daily or on some days.
<b>Crude Mortality</b>	Number of deaths/estimated mid-year population times.
<b>Rates</b>	Number per population
<b>GLM</b>	Great Lakes Marketing.
<b>HCF</b>	Healthy Communities Foundation of the Hospital Council of Northwest Ohio.
<b>HP 2010</b>	Healthy People 2010, a comprehensive set of health objectives published by the Office of Disease Prevention and Health Promotion, U.S. Department of Health and Human Services.

**N/A**

Data not available.

**ODH**

Ohio Department of Health

**Race/Ethnicity**

**Census 2000:** U.S. Census data consider race and Hispanic origin separately. Census 2000 adhered to the standards of the Office of Management and Budget (OMB), which defines Hispanic or Latino as “a person of Cuban, Mexican, Puerto Rican, South or Central American, or other Spanish culture or origin regardless of race.” Data are presented as “Hispanic or Latino” and “Not Hispanic or Latino.” Census 2000 reported five race categories including: White, Black or African American, American Indian & Alaska Native, Asian, Native Hawaiian and Other Pacific Islander. Data reported “White alone” or “Black alone” mean the respondents reported only one race.

**Race/Ethnicity**

**2003 Lucas County Health Assessment:** Data are reported in the following categories:

- White (Non-Hispanic/Latino)
- Black or African American (Non-Hispanic/Latino)
- Hispanic/Latino

# Lucas County

## Adult Health Assessment

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## Methods for Weighting the 2003 Lucas County Assessment Data

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Data from sample surveys have the potential for bias if there are different rates of response for different segments of the population. In other words, some subgroups of the population may be more represented in the completed surveys than they are in the population from which those surveys are sampled. If a sample has 25% of its respondents being male and 75% being male, then the sample is biased towards the views of females (if females respond differently than males). This same phenomenon holds true for any possible characteristic that may alter how an individual responds to the survey items.

In some cases, the procedures of the survey methods may purposefully over-sample a segment of the population in order to gain an appropriate number of responses from that subgroup for appropriate data analysis when investigating them separately (this is often done for minority groups). Whether the over-sampling is done inadvertently or purposefully, the data needs to be weighted so that the proportioned characteristics of the sample accurately reflect the proportioned characteristics of the population. In the 2003 Lucas County survey, African Americans were purposefully over-sampled and low socioeconomic individuals were inadvertently over-sampled. For all analyses conducted from the 2003 Lucas County, a weighting was applied prior to the analysis that weighted the survey respondents to reflect the actual distribution of Lucas County based on age, sex, race, and income.

Weightings were created for each category within sex (male, female), race (White, African American, Hispanic, Other), Age (10 different age categories), and income (7 different income categories). The numerical value of the weight for each category was calculated by taking the percent of the Lucas County within the specific category and dividing that by the percent of the sample within that same specific category. Using sex as an example, the following represents the data from the 2003 Lucas County Survey and the 2002 estimates from Census' American Community Survey (which gives estimates for Lucas County based on a combination of their 2002 survey and the 2000 census data).

<u>Sex</u>	<u>2003 Lucas Survey</u>		<u>2002 Lucas County Census Estimates</u>		<u>Weight</u>
	<u>Number</u>	<u>Percent</u>	<u>Number</u>	<u>Percent</u>	
Male	798	39.29099	214,074	48.14871	1.22544
Female	1,233	60.70901	230,536	51.85129	0.85410

In this example, it shows that there was a larger portion of females in the sample compared to the actual portion in Lucas County. The weighting for males was calculated by taking the percent of males in Lucas County (based on Census information) (48.14871%) and dividing that by the percent found in the 2002 Lucas County sample (39.29099%) [ $48.14871/39.29099$ = weighting of **1.22544** for males]. The same was done for females [ $51.85129/60.70901$ = weighting of **0.85410** for females]. Thus males' responses are weighted heavier by a factor of 1.22544 and females' responses weighted less by a factor of 0.85410.

This same thing was done for each of the 23 specific categories as described above. For example, a respondent who was Female, White, in the age category 35-44, and with a household income in the \$35-\$50k category would have an individual weighting of 1.6224058 [0.854095382 (weight for females) x 1.316644083 (weight for White) x 0.946409017 (weight for age 35-44) x 1.524424256 (weight for income \$35-\$50k)]. Thus, each individual in the 2003 Lucas County sample has their own individual weighting based on their combination of age, race, sex, and income. See next page for each specific weighting and the numbers from which they were calculated.

Multiple sets of weightings were created and used in the statistical software package (SPSS 12.0) when calculating frequencies. For analyses done for the entire sample and analyses done based on subgroups other than age, race, sex, or income – the weightings that were calculated based on the product of the four weighting variables (age, race, sex, income) for each individual. When analyses were done comparing groups within one of the four weighting variables (e.g., smoking status by race/ethnicity), that specific variable was not used in the weighting score that was applied in the software package. In the example smoking status by race, the weighting score that was applied during analysis included only age, sex, and income. Thus a total of five weighting scores for each individual were created and applied depending on the analysis conducted. The weight categories were as follows:

- 1) **Total weight** (product of 4 weights) – for all analyses that did not separate age, race, sex, or income.
- 2) **Weight without sex** (product of age, race, and income weights) – used when analyzing by sex.
- 3) **Weight without age** (product of sex, race, and income weights) – used when analyzing by age.
- 4) **Weight without race** (product of age, sex, and income weights) – used when analyzing by race.
- 5) **Weight without income** (product of age, race, and sex weights) – used when analyzing by income.
- 6) **Weight without sex or age** (product of race and income weights) – used when analyzing by sex and age.
- 7) **Weight without sex or race** (product of age and income weights) – used when analyzing by sex and race.
- 8) **Weight without sex or income** (product of age and race weights) – used when analyzing by sex and income.

Category	Lucas Sample	%	2002 data (Census's American Community Survey Estimates for Lucas County )	%		Weighting Value
<b>Sex:</b>						
Male	798	39.29099	214,074	48.14871		1.225439
Female	1233	60.70901	230,536	51.85129		0.854095
<b>Age:</b>						
20-24	185	9.8299681	33,921	10.67541		1.086006
25-34	351	18.650372	62,748	19.74766		1.058835
35-44	424	22.529224	67,750	21.32186		0.946409
45-54	349	18.544102	61,550	19.37064		1.044571
55-59	123	6.5356004	22,136	6.966505		1.065932
60-64	128	6.8012752	16,982	5.34447		0.785804
65-74	180	9.5642933	26,255	8.262811		0.863923
75-84	119	6.3230606	22,457	7.067528		1.117738
85+	23	1.2221041	3,950	1.24312		1.017196
<b>Race:</b>						
African American	634	33.020833	75,345	16.94631		0.513201
White	1123	58.489583	342,394	77.00996		1.316644
Hispanic	62	3.2291667	21,426	4.819055		1.492352
Other	101	5.2604167	5,445	1.224669		0.232808
<b>Income</b>						
Less than \$10,000	617	35.706019	21,242	11.48073		0.321535
\$10k-\$15k	240	13.888889	13,143	7.103441		0.511448
\$15k-\$25k	267	15.451389	26,880	14.52792		0.940234
\$25k-\$35k	145	8.3912037	29,086	15.72021		1.873415
\$35k-\$50	173	10.011574	28,238	15.26189		1.524424
\$50k-\$75k	145	8.3912037	32,530	17.5816		2.095241
\$75k or more	141	8.1597222	33,904	18.32421		2.24569

Note: The weighting ratios are calculated by taking the ratio of the proportion of the population of Lucas County (determined from Census ACS 2002 data) in each subcategory by the proportion of the sample in the Lucas County survey for that same category.



## 2003 Lucas County Health Assessment Data Collection Sites

Site	Date	Time
Adalante	6/30/2003	2:00 PM
Adalante	7/1/2003	5:15 PM
Adalante	7/1/2003	6:00 PM
Adalante	7/2/2003	5:15 PM
Adalante	7/3/2003	5:15 PM
Aldersgate	6/23/2003	9:00-11:00 AM
Aldersgate U.M.C.	6/2/2003	9:00 AM
Augsburg	6/30/2003	11:45 AM
Augsburg Lutheran	6/13/2003	
Aurora Gonzalez	6/13/2003	9:15 AM-12:00 PM
Aurora Gonzalez	6/25/2003	5:30-7:00 PM
Beach House	6/9/2003	9:00-11:30 AM
Broadway Food Center	5/23/2003	9:30 AM-1:00 PM
Catholic Charities (Toledo)	6/12/2003	3:00-5:00 PM
Cherry St. Mission	5/28/2003	5:00-7:00 PM
Christ the King	6/20/2003	8:30 AM
East Toledo Family Center	6/7/2003	8:45-1:00 PM
East Toledo Sr. Center	6/5/2003	9:30 AM-12:20 PM
Eleanor Kahle Sr. Center	6/4/2003	10:30 AM-1:00 PM
Erie Drug	5/30/2003	2:00-6:00 PM
Erie Foods	6/21/2003	12:00-2:00 PM
Erie Foods	7/3/2003	9:00-11:30 AM
Erie Street Market	6/14/2003	12:00-2:00 PM
Family Food Center	5/29/2003	9:30-11:30 AM
Family House	5/23/2003	2:00-4:00 PM
Feed Your Neighbor (Secor)	5/28/2003	1:00-2:30 PM
Frederick Douglas Comm. Center	6/6/2003	9:00-11:00 AM
Fred's Pro Hardware	5/24/2003	10:00 AM-2:00 PM
Friendly Center	6/11/2003	8:30-11:30 AM
Goodwill (Toledo)	6/11/2003	1:00-3:30 PM
Helping Hands	5/19/2003	10:30 AM-12:30 PM
Janney's Ace Hardware	5/20/2003	9:00-11:30 AM
Kroger (Manhattan)	6/10/2003	2:00-5:00 PM
Kroger (Miracle Mile)	5/27/2003	2:00-5:00 PM
Kroger (Navarre)	6/3/2003	2:00-5:00 PM
Kroger (Spring Meadows)	6/17/2003	1:00-4:00 PM
Kroger (Sylvania)	6/20/2003	9:00 AM-12:00 PM
LaGrange Food Center	6/2/2003	10:00 AM-1:00 PM
Library (East side)	6/6/2003	2:00-5:00 PM
Library (Holland)	6/4/2003	2:00-5:00 PM
Library (Kent Branch)	6/9/2003	2:00-5:00 PM
Library (main)	6/12/2003	9:00 AM-12:00 PM
Library (Sanger)	6/16/2003	1:45-5:15 PM

<b>Site</b>	<b>Date</b>	<b>Time</b>
Library (Sylvania)	6/13/2003	2:00-5:00 PM
Library (W. Sylvania Ave.)	6/2/2003	2:00-5:00
Library (Waterville)	6/23/2003	2:00-5:00 PM
Lucas Co. Job and Family Services	6/27/2003	9:00-11:30 AM
Lutheran Services	6/20/2003	12:45 PM
Lutheran Services	6/30/2003	11:00 AM
Maumee Senior Center	6/18/2003	10:30-1:00
Mighty Mart	5/27/2003	9:00-11:00 AM
NAPA Auto Center	5/29/2003	2:00-4:00 PM
Neighborhood Health Assoc. of Lucas Co.	6/24/1903	2:00-4:00 PM
Netty's Ice Cream	5/27/2003	7:00-9:00 PM
Northtowne Square Mall	6/25/2003	11:00 AM-1:30 PM
Our Lady of Mt. Carmel	6/18/2003	9:00 AM
Our Lady of Mt. Carmel	6/30/2003	9:00 AM
Planned Parenthood	5/19/2003	1:30 AM-3:00 PM
R&S Market (Swanton)	6/10/2003	10:00 AM-12:00 PM
Rite Aid Pharmacy (Swanton)	6/25/2003	2:00-4:00 PM
Safeway Foods	5/21/2003	9:30-11:30 AM
Safeway Foods	6/26/2003	2:00-4:30 PM
St. Francis DeSales	5/30/2003	9:15-11:30 AM
St. Patricks	6/9/2003	12:00 PM
St. Peter and Paul	6/23/2003	1:45 PM
St. Peter and Paul	7/3/2003	1:45 PM
Sterling Food Store	6/18/2003	2:00-4:00 PM
Stone Oak Market	6/19/2003	3:00-5:00 PM
Swanton Supervalu	6/26/2003	9:00-11:30 AM
Sylvania Senior Center	6/16/2003	9:00-11:30 AM
Thackery's Books	6/28/2003	11:00 AM-3:00 PM
The Pharm (Secor)	5/22/2003	11:00 AM-3:00 PM
Timberlake Church	6/19/2003	11:00 AM
Timberlake Comm. Church	6/12/2003	1:00-2:00 PM
Tru Value Hardware (Whitehouse)	5/21/2003	2:00-4:30 PM
UT Student Union	6/3/2003	10:00 AM-1:00 PM
Walter's Pharmacy	6/5/2003	2:00-3:30 PM
Waterville BP Convenience Store	6/19/2003	12:00-2:00 PM
West Family YMCA (Tremainsville)	5/22/2003	5:00-9:00 PM
YMCA Southwest	6/17/2003	8:30-11:30 AM
Your Community Market	6/27/2003	2:00-4:00 PM